



8TH ASIAN CBT CONGRESS

**THEME: Cognitive Behavioural Therapies Across Illness & Health
Advances, Challenges & Way Forward**

28th February to 3rd March 2024

BOOK OF ABSTRACTS



**WORLD CONFEDERATION
OF COGNITIVE AND BEHAVIOURAL THERAPIES**



सर्वस्वातः सर्वं सर्वानमनः



8TH ASIAN CBT CONGRESS

**THEME: Cognitive Behavioural Therapies Across Illness & Health
Advances, Challenges & Way Forward**

28th February to 3rd March 2024





प्रियंक कानूनगो
Priyank Kanoongo
अध्यक्ष
Chairperson

भारत सरकार
GOVERNMENT OF INDIA
राष्ट्रीय बाल अधिकार संरक्षण आयोग
NATIONAL COMMISSION FOR PROTECTION OF CHILD RIGHTS
नई दिल्ली-110 001
New Delhi - 110 001



MESSAGE

Dear Participants,

National Commission for Protection of Child Rights is a statutory body constituted under Section 3 of the Commission for Protection of Child Rights (CPCR) Act, 2005 to protect the child rights and other related matters in the country. In one of the functions laid down under Section 13 of the CPCR Act, 2005, the Commission has been assigned with the function to examine and review the safeguards provided by or under any law for the time being in force for the protection of child rights and recommend measures for their effective implementation.

All India Institute of Medical Sciences (AIIMS), New Delhi is collaborating with NCPCR for the 1st Asian Trauma Conclave and 8th Asian Cognitive Behaviour Therapy 2024. I extend a warm welcome to all attendees, esteemed speakers, and contributors for this Conclave.

As children experience more adversities in their life, they are at higher risk of mental problems which ultimately affect all aspect of their health, quality of life and wellbeing. I know there is a fast growing scientific literature with profound evidence for efficacy of psychological treatments (particularly, Cognitive Behaviour Therapy as it is considered as par with medical treatment in many and is the first line of treatment for some mental illnesses) for preventive and curative mental health of women and children. But it is not enough to merely provide treatment; we must also work to create a supportive environment that promotes the well-being of children in all aspects of their lives. This includes fostering safe and nurturing communities, promoting positive parenting practices, and investing in education and social services that prioritize the needs of children.

In conclusion, the rights of children are non-negotiable, and it is incumbent upon each and every one of us to uphold and protect them. By advocating for the rights of children and promoting interventions such as cognitive-behavioural therapy, we can lay the foundation for a brighter, more equitable future for generations to come.

I am happy to know that the conclave focuses on trauma and children during these 4 days of deliberations. I hope the conclave and this congress both will provide you all a great opportunity to listen and learn from eminent researchers, clinicians and academicians of all across the globe. I thank to the scientific committee, we are about to have an enriching program in the form of invited lectures, workshops, award papers, symposium and poster presentation from the field of CBT.

I congratulate to the organizing committee for hosting this Congress in India and also wishing a great future ahead to the team IACBT and AIIMS, New Delhi.

Place: New Delhi
Dated: 23.02.2024

(Priyank Kanoongo)

5वां तल, चन्द्रलोक बिल्डिंग, 36, जनपथ, नई दिल्ली-110 001
5th Floor, Chanderlok Building, 36, Janpath, New Delhi-110 001
दूरभाष /Ph. :011-23478212, 23478200
ई-मेल / E-mail : cp.ncpcr@nic.in वेब / Web:www.ncpcr.gov.in



अखिल भारतीय आयुर्विज्ञान संस्थान

अन्सारी नगर, नई दिल्ली-११००२६ (भारत)

ALL INDIA INSTITUTE OF MEDICAL SCIENCES

ANSARI NAGAR, NEW DELHI - 110029 (INDIA)

Ph. 011-26594805/4800, Email: director@aiims.gov.in

23rd February, 2024

दिनांक/Dated :.....

MESSAGE



Dear Participants!


It gives me great pleasure to invite you all to 8th Asian Cognitive Behaviour Therapy Congress being organized by Indian Association of CBT and Department of Psychiatry of the All India Institute of Medical Sciences (AIIMS) from 28th to 3rd March 2024 in New Delhi, India.

As a pediatric surgeon, I understand the crucial role played by psychological treatments in health, recovery and wellbeing of population in general and patients in particular. The best part of this academic forum is the theme that focuses on Cognitive Behavioural Therapies for Health & Illness: Advances, Challenges & Way forward. And I appreciate the theme as it focuses on health of women and children. Since CBT has scientific evidence for both physical and mental illnesses, the scientific deliberations around this theme are important and necessary especially in Asian context where majority of countries have low resource healthcare settings. As CBT has the highest scientific evidence for treatment efficacy cultural adaptation is also important for Asia.

Again, as Asia is highly vulnerable to all kinds of adverse life events, dedicating a full day (1st Asian Trauma Conclave on Day-I of this Congress) on applicability of CBT to ameliorate the effects of such events will be definitely beneficial. There are also many interesting theme-based pre-congress workshops from which all professionals will benefit immensely. Invited talks, Keynote lectures, Open and Invited Symposia, Scientific papers, and Skill Classes are some other academic attractions. More importantly, education and supervised training in CBT also vary significantly in Asia and cooperation in building a trained CBT workforce can have significant contributions to this region.

I welcome all professionals to AIIMS New Delhi to share their clinical and research experience during this Asian CBT Congress under the aegis of IACBT, ACBTA, and WCCBT. Young scientists are particularly encouraged to participate to learn from the global and Asian experts in this field and show their passion to excel in the field of CBT for better health in Asian countries.

Best Wishes

 23/2/2024

(Prof. M. Srinivas)
Director



WCCBT OFFICERS

President

Lata K. McGinn, PhD

Past-President

Keith Dobson, PhD

Secretary

Rod Holland, PhD

Treasurer

Ross Menzies, PhD

BOARD OF DIRECTORS

Representing Asia

Firdaus Mukhtar (ACBTA)

Nimisha Kumar (ACBTA)

Representing Australasia

Ross Menzies, PhD (AACBT)

Ron Chambers, PhD (AnzaCBT)

Representing Central and South America

Laura Hernandez Guzman, PhD

(ALAMOC)

Julio Obst Camerini, PhD

(ALAMOC)

Representing Europe

Andreas Veith, PhD (EABCT)

Maria Ceu do Salvador, PhD

(EABCT)

Representing North America

Lata McGinn, PhD (ABCT)

David Dozois, PhD (CACBT)

Representing IACBT

Lynn McFarr, PhD

Mehmet Sungur, PhD

Website: www.wccbt.org

Emails:

president@wccbt.org

socialmedia@wccbt.org

newsletter@wccbt.org

web@wccbt.org

February 19, 2024

Welcome to the 8th Congress of the Asian CBT Association! I am Dr. Lata McGinn, *Professor of Psychology at Yeshiva University and Co-Founder and Co-Director of Cognitive & Behavioral Consultants (CBC)* in New York City. In my capacity as the *President of the World Confederation of Cognitive and Behavioral therapies (WCCBT)*, I would like to welcome you to the 8th Congress of the Asian CBT Association, which is being organized by the Indian Association for CBT and held on February 28th through March 2nd, 2024, at the All-India Institute of Medical Sciences (AIIMS) in New Delhi, India. The theme of the Congress is “Cognitive Behavioral Therapies Across Illness and Health: Advances, Challenges & the Way Forward.”

As one of the six permanent members of the WCCBT, the Asian CBT Association (ACBTA), which is hosting the congress in New Delhi, joins the WCCBT in our mission to disseminate CBT and advocate for mental health across the globe. I am delighted to attend the 8th ACBTA Congress in New Delhi and want to congratulate Dr. Firdaus Mukhtar, *President of the ACBTA* and the rest of the ACBTA board for their impressive work in disseminating CBT across Asia.

In my role as the *Honorary President of the Indian Association of CBT (IACBT)*, I can attest to the excellence and dedication of the Indian Association of CBT (IACBT), which is a permanent member of the Asian CBT Association and is organizing the Congress in New Delhi. I would like to thank Dr. Nimisha Kumar, *President of the IACBT* and her colleagues on the IACBT board for putting together an impressive congress with esteemed speakers from across the globe.

I am honored to have been invited to present both a Pre-Congress Workshop on “CBT for Post-traumatic stress disorder and a Keynote Address on Stabilizing Chaos: Fostering Psychological Resilience in the Wake of Crises, Adversity and Trauma.

I very much look forward to being back in New Delhi in February 2024 and to seeing many practitioners, researchers, academics, and students from around the world participating in this exciting congress. I look forward to seeing you in New Delhi.

Yours sincerely,

Lata K. McGinn, Ph.D.

President, WCCBT (2023 - 2026)



Dear Esteem Delegates,

It is my great pleasure to welcome you all to this 8th Asian Cognitive Behaviour Therapy Congress hosted by the Indian Association for Cognitive Behaviour Therapy. With the utmost relevant theme '*Cognitive Behavioural Therapies Across Health & Illness: Advances, Challenges & Way forward*', this event will bring together leading experts and practitioners not just from Asia but from around the world to discuss the latest developments and insights in the field of cognitive behaviour therapy.

I am honoured to have the opportunity to share my thoughts and insights with you all. Cognitive behaviour therapy is an area of study that has seen significant growth and development over the years, and this conference serves as a platform to share and learn from each other's experiences. During this conference, we will discuss the latest developments and trends in cognitive behaviour therapy, including new approaches, techniques, and technologies. We will also explore how we can make cognitive behaviour therapy more accessible and available to those who need it.

I encourage everyone to participate fully in the conference, to share their insights, and learn from each other. I am confident that the discussions and collaborations during this conference will lead to significant progress in advancing CBT in Asia.

I would like to express my gratitude to all the presenters, speakers, and attendees for their contributions and support in making this conference possible. Your expertise and knowledge will undoubtedly enrich our discussions and contribute to the advancement of cognitive behaviour therapy, not just for research and clinical services but also for community at large.

Once again, welcome to the 8th Asian Cognitive Behaviour Therapy Congress, enjoy best of the city, sights and scrumptious food in New Delhi, and I wish you all a productive and enjoyable experience.

Yours sincerely,



PROF DR FIRDAUS MUKHTAR
President
Asian Cognitive Behavioral Therapies Association



Website: www.acbta.org

**All India Institute of Medical Sciences
Ansari Nagar, New Delhi-110029**

Dr. Pratap Sharan
Professor & Head
Department of Psychiatry



Fax: 011- 26588663
Off: 011- 26593236, Ext. 3533
E-mail: pratapsharan@yahoo.com



Date: 26th February 2024

Message from Chairman, Organizing Committee

Dear Delegates, Speakers, Sponsors, and Exhibitors!

As a collaborative organizing institution of Indian Association of Cognitive Behaviour Therapy (IACBT), on behalf of the Department of Psychiatry, AIIMS, New Delhi, I welcome you all to this premier medical institute. The department has previously organised many acclaimed conferences including the World Congress of Social Psychiatry. I am happy that this time the department is organizing a key conference focusing on psychological interventions.

In the dynamic realm of psychological intervention, Cognitive Behaviour Therapy (CBT) shines as a cornerstone of evidence-based practice, illuminating pathways to profound personal growth and emotional well-being. As we navigate the complexities of the human mind, understanding the principles and applications of CBT becomes increasingly crucial. This abstract book represents a milestone in the dissemination of knowledge and innovation within the field of CBT. Within its pages lie a mosaic of research abstracts, each a testament to the versatility, adaptability, and efficacy of CBT across diverse populations and contexts. It is also a testament to the enduring relevance and expanding horizons of CBT in the contemporary landscape of mental health care. From anxiety and depression to trauma and addiction, CBT continues to demonstrate its efficacy in fostering resilience and facilitating transformative change.

As we delve into these abstracts, we embark on a journey of discovery, exploring the latest insights, methodologies, and therapeutic techniques that shape the practice of CBT today. Whether you are a seasoned clinician, a researcher, or an aspiring mental health professional, this abstract book serves as a valuable resource, offering glimpses into the frontiers of CBT and inspiring ongoing dialogue, collaboration, and innovation in our collective pursuit of mental wellness.

Enjoy and preserve your jubilant experience of 1st Asian Trauma Conclave and 8th Asian CBT Congress from 28 Feb-3 March 2024 at AIIMS, New Delhi.

Pratap Sharan
Chairman Organizing Committee



Dear Members of the Asian Cognitive Behavioral Therapies Association,

The 8th Asian CBT Congress is the largest mental health event in India's history, with CBT therapists, researchers, educators, and students attending from more than 20 countries! It provides a wonderful opportunity to learn about the latest research and advances in the field and to meet, talk, and network with colleagues.

The scientific program is wonderful, with excellent keynote addresses, invited talks, workshops, skills classes, symposia, panel discussions, and paper and poster presentations. Beck Institute's Director of CBT Programs, Dr. Allen Miller, will be at the conference, presenting a workshop (CBT in Practice), where he will review the essential components of CBT and a keynote address (Humanism in CBT)), and he'll chair a symposium (CBT Adaptations in Asia).

The congress will also present two awards, named after my father, Aaron Beck. One is for Outstanding Doctoral Research in CBT from Asia and the other is for Distinguished Researcher from Asia. I know my father would have been so pleased to know about these awards.

I predict this important conference will have a positive impact on treatment, training, and research in Asia.

Sincerely,

A handwritten signature in black ink that reads "Judith S. Beck". The signature is written in a cursive style.

Judith S. Beck, PhD
President, Beck Institute for Cognitive Behavior Therapy
www.beckinstitute.org





INDIAN ASSOCIATION FOR COGNITIVE BEHAVIOUR THERAPY (IACBT)

www.iacbt.org

REGISTERED in 2016 UNDER THE SOCIETIES REGISTRATION ACT XXI OF 1860
(REG. NUMBER. S/1951/2016/DISTT. SOUTH)

PERMANENT MEMBER – ASIAN CBT ASSOCIATION (ACBTA)

Honorary President

Dr. Lata K. McGinn
Yeshiva Univ, New
York
USA

President

Dr Nimisha Kumar
Professor
Faculty of Behavioural
Sciences, SGT
University, Gurugram

Vice-President

Dr. Ritu Sharma
Dean, Dept. of
Psychology, SLS, PDEU,
Gandhinagar

General Secretary

Dr. Sujata Satapathy
Professor of Clin.
Psychology
AIIMS, New Delhi

Treasurer

Parul Gupta
Child Psychologist
Potentials, New Delhi

Members

Namita Kaith
Counselling
Psychologist
New Delhi

Purnima Sahai
Counselling
Psychologist
New Delhi

Dr Susmita Halder
Associate Prof, Dept. of
Psychology, St Xaviers
University, Kolkata

IACBT

177, SFS Hauzkhas
Apartments
New Delhi-110016

WhatsApp
9953681570
www.iacbt.org

iacbtmembers@gmail.com

ACBTA 2024

MESSAGE

Dear Delegates & esteemed Invited guests

It is a matter of immense pride and honor for me to be hosting the 8th ACBTA Congress at AIIMS, New Delhi. The Asian CBTs Association (ACBTA) currently represents eleven Member Associations and serves as a vital platform for the advancement and dissemination of Cognitive Behavioral Therapy (CBT) within the diverse cultural landscape of Asia.

This Congress is a milestone for the Indian Association for CBT (IACBT) as one of its key objectives is to bridge the gap between research and clinical practice, ensuring that CBT interventions are tailored to the unique cultural context of India. IACBT is committed to raising awareness about the importance of mental health and reducing the stigma associated with seeking help.

Health and illness exist on a dynamic continuum, reflecting the diverse states of well-being experienced by individuals throughout their lives. This continuum acknowledges that health is not simply the absence of illness but encompasses physical, mental, and social dimensions.

Mental health is an integral part of health as there cannot be a healthy body without a healthy mind. The substantial body of research supporting the effectiveness of CBT underscores its value as a cornerstone of mental health treatment, providing individuals with practical tools and strategies to address a wide range of psychological difficulties. Moreover, CBT is highly adaptable and can be tailored to meet the unique needs of different populations and cultural contexts.

This Congress is the biggest mental health event in India, being held face to face after the COVID-19 pandemic and aims to bring together a plethora of CBT experts, over 600 researchers and students from across the globe, on a single platform to share their knowledge and innovative ideas in the field.

The Scientific program promises to be an intellectual treat and includes twelve keynote addresses & thirty invited talks by eminent CBT therapists, the 1st Asian Trauma conclave, over twenty training workshops and skill classes, symposia and panel discussions, in addition to paper and poster presentations across five days. More than 20 countries from across the globe will be participating in the congress.

The Congress also aims to acknowledge & honour the contribution of senior experts in the field and at the same time encourage young and mid-career CBT enthusiasts to grow in this field through various awards, particularly the Aaron Beck Outstanding Doctoral research in CBT from Asia and the Aaron Beck Distinguished Researcher from Asia awards being presented for the first time in any CBT Congress.

We also look forward to publishing high quality research papers received in the form of edited books and special issues of journals by recognized publishers. The IACBT is also proudly launching its official Journal – the Journal of Cognitive Behavioural Research (JCBTR) in this event.

In addition to the scientific program, the congress aims to showcase the rich Indian culture for our international guests and become a front runner in the field of evidence based Mental Health. I offer my best wishes and few days of learning, reflection, networking and memories to last a lifetime to everyone!

Nimisha Kumar

Dr Nimisha Kumar, PhD
Founder & President, IACBT
President-Elect, ACBTA





दिनांक/ Dated :

Message from the Organizing Committee

Dear All!

Subsequent to the success of 7th Asian CBT Congress in Malaysia in July-2022, the Asian CBT Association continues the excellent tradition by deciding to hold its conference, from 28 Feb-2 March 2024, physically in the historic and vibrant city of New Delhi, the capital of India. On behalf of the organizing team, I would like to extend our warmest invitation to you to participate in 8th Asian CBT Congress (ACBTA -2024) and its flagship one-day programme on psychological trauma (1st Asian Trauma Conclave).

Indian Association of CBT, in collaboration with AIIMS New Delhi, is extremely pleased to host this event for all our Asian colleagues after the long period of enforced hibernation throughout COVID period. To get together again with colleagues and continue ACBTA's work in promoting mental health care across Asia will be both exciting and rewarding. We want to sincerely thank our collaborating organizations and funding agencies for their support to organize this event.

CBT in Asian countries has to emerge to amalgamate population specific nuances mixed with a robust structure suiting the low mental health resource setting and lack of uniformity in CBT training in mind. The congress will be a great opportunity to explore more in this regard so as to come up with a common framework for CBT training and supervision in Asian countries, particularly where a professional association for CBT exists. The congress in 2024 will create the unique blend of original CBT and new CBT that characterizes much of Asia.

This Asian CBT Congress represents an excellent opportunity to create, initiate, and strengthen professional clinical and research relationships in the area of CBT. We are extremely thankful for the overwhelming response we have received from across the globe!

We look forward to hosting you all in AIIMS, New Delhi with booming knowledge, blooming professional networks, sumptuous food, roaming around, and lot of fun activities!!

Happy shopping and roaming around in New Delhi!

Sujata Satapathy

**Sujata Satapathy, General Secretary of IACBT
Professor, Clinical Psychology, Dept of Psychiatry
Organizing Secretary ACBTA-2024**





8TH ASIAN CBT CONGRESS

THEME: Cognitive Behavioural Therapies Across Illness & Health
Advances, Challenges & Way Forward

CHIEF ADVISORS



Prof. Lata K. McGinn
President-Elect WCCBT
Hon. President IACBT



Rod Holland
Board member, BABCP
Past President, EACBT



Krish Nath
Senior CBT Practitioner
Board Member, BABCP

ACBTA ADVISORS



Prof. Alvin Ng Lai Oon
Secretary, ACBTA
Malaysia



Prof. Shin-ichi Ishikawa
Training & Dev,
ACBTA, Japan



Prof. Muhammad Irfan
Research & Innovation
ACBTA, Pakistan



Prof. Jong Sun Lee
Treasurer, ACBTA
South Korea

CHAIRS



Prof. Firdaus Mukhtar
Prof. & Deputy Dean, School of Graduate
Studies
University Putra Malaysia & President, ACBTA



Prof. Pratap Sharan
HOD, Dept. of Psychiatry
AIIMS, New Delhi



WORLD CONFEDERATION
OF COGNITIVE AND BEHAVIOURAL THERAPIES





8TH ASIAN CBT CONGRESS

**THEME: Cognitive Behavioural Therapies Across Illness & Health
Advances, Challenges & Way Forward**

CO-CHAIR



Prof. Nimisha Kumar
President, IACBT & President-elect ACBTA
Professor, Faculty of Behavioural Sciences, SGT
University, Gurugram.

ORGANIZING SECRETARY



Prof. Sujata Satapathy
Gen. Secretary IACBT
Professor, Dept. of Psychiatry, AIIMS

CO-ORGANIZING SECRETARIES



Prof. Ritu Sharma
Vice President, IACBT
Dean, Dept. of Psychology
SLS, PDEU, Gandhinagar



Dr. Susmita Halder
Associate Professor
Dept. of Psychology
St Xavier's University, Kolkata



Dr. Vibha Sharma
Associate Professor
IHBAS, Delhi



Dr. Chinu Agarwal
Founder Director
Feeling Minds



Dr. Anamika Sahu
Assistant Professor
NIMHANS

TREASURERS



Dr. Vijay P Barre
Assistant Professor
AIIMS, New Delhi



Dr. Lokesh Gupta
Assistant Professor
Amity University, Haryana



**WORLD CONFEDERATION
OF COGNITIVE AND BEHAVIOURAL THERAPIES**



सर्वेभ्यो हि हिताय



8TH ASIAN CBT CONGRESS

THEME: Cognitive Behavioural Therapies Across Illness & Health
Advances, Challenges & Way Forward

MEMBERS



Dr. Siddiq Hussain
Mindworks Bait, Udaipur



Dr. Renu Sharma
AIIMS, New Delhi



Dr. Swati Kedia
AIIMS, New Delhi



Dr. Dipti Joshi
Ahemdabad



Dr. Shishir Palsapure
Morphic Minds, Nagpur



Dr. Anupama Gadkari
Srujan, Nagpur



Dr. Nudrat Jahan
SGT University, Haryana



Dr. Rati Khurana
IILM, Gurugram

SCIENTIFIC COMMITTEE

Prof. Nimisha Kumar

Prof. Sujata Satapathy

Dr. Susmita Halder

Prof. Muhammad Irfan

SCIENTIFIC COMMITTEE ADVISORS



Prof. Firdaus Mukhtar
Malaysia



Prof. YoungHee Choi
South Korea



Dr. Shahanur Hossain
Bangladesh



Dr. Joe Nuttorn
Thailand



Prof. Farooq Naem
Pakistan



Prof. Mehmet Sungur
Turkiye



Insan Firdaus
Indonesia



Dr. Junichiro Kanazawa
Japan



WORLD CONFEDERATION
OF COGNITIVE AND BEHAVIOURAL THERAPIES





8TH ASIAN CBT CONGRESS

THEME: Cognitive Behavioural Therapies Across Illness & Health
Advances, Challenges & Way Forward

SCIENTIFIC COMMITTEE ADVISORS



Dr. Daisuke Fujisawa
Japan



Prof. Rajinder K Dhamija
India



Prof Kanwal Preet Kochhar
India

CONGRESS CO-ORDINATORS



Mansi Chadha
AIIMS, New Delhi



Vidhi Khanna
AIIMS, New Delhi



Usha Devi
AIIMS, New Delhi



Shreya Kulshreshtha
AIIMS, New Delhi



Akanksha Yadav
AIIMS, New Delhi



Dharaa Gupta
AIIMS, New Delhi



Mandeep Kaur
AIIMS, New Delhi



Rekha Patel
AIIMS, New Delhi



Dr. Silky Arora
ICMR, New Delhi



Dr. Rachana Maurya
AIIMS, New Delhi



WORLD CONFEDERATION
OF COGNITIVE AND BEHAVIOURAL THERAPIES



सर्वेभ्यो हि सुखं सर्वभ्यो हि भवतु

Table of Contents...

Keynote Lectures	1 - 8
Invited Talks	9 - 20
Skill Classes	21 - 29
Invited Symposia	30 - 35
Track 1: CBT for Psychological Traumatic Life Events	
Open Symposia	36 - 43
Open Presentations	44 - 58
Posters	59 - 73
Virtual Presentations	74 - 76
Track 2: CBT for Mental Disorders and Specific Illnesses	
Open Symposia	77 - 88
Open Presentations	89 - 140
Posters	141 - 180
Virtual Presentations	181 - 184
Track 3: Cultural Adaptation of CBT and Current Trends	
Open Symposia	185 - 192
Open Presentations	193 - 222
Posters	223 - 248
Virtual Presentations	249 - 253
Track 4: Standards in CBT Practice, Training, and Supervision	
Open Symposia	254 - 255
Open Presentations	256 - 259
Posters	260 - 264
Special Symposia: Celebrating 50 years of JACBT, Japan	265 - 268





ACBTA 2024 NEW DELHI SCIENTIFIC PROGRAM

KEYNOTE LECTURES



KEYNOTE LECTURES

KNL/1: Untangling Complex PTSD and PTSD: theory, diagnosis, and implications for clinical management.

Keynote Speaker: James A Courtney
Contact: james.courtney@monash.edu
Country: Australia

The World Health Organisation introduced Complex PTSD (CPTSD) as a Disorder specifically associated with stress in the International Classification of Diseases 11th revision (ICD-11; 2018). This relatively new diagnostic classification informs the conceptualisation and treatment of complex trauma which is generally defined as sustained, repeated, or multiple forms of traumatic exposure. To increase clinical utility, ICD-11 included the lowest possible number of core symptoms and only those diagnoses that can be supported by specific therapies. Consistent with this approach, CPTSD comprises only six symptom clusters: the three criteria required for a PTSD diagnosis and an additional three disturbances of self-organisation (emotional dysregulation, interpersonal difficulties, and negative self-concept). The introduction of CPTSD as a diagnosis has triggered much research activity to confirm the psychometric underpinnings and validity, and clinical research to investigate the bio-psycho-social-cultural conditions associated with this disorder. At present, evidence-based treatment guidelines remain in their infancy, and knowledge of the precursory conditions that might differentiate CPTSD from PTSD is growing. In contrast, the diagnostic basis of PTSD is long-established having been first published in the DSM-III (1980) and then the ICD-10 (1990), and effective treatments are well documented and supported by a robust literature base. Clinicians and researchers working in the field of trauma must now 'upskill' to understand the nosological differences between CPTSD and PTSD, the multidimensional nature of these presentations, and the utility of available treatment modalities. This presentation will be clinically focused and untangle the precursors and diagnostic differences between PTSD and CPTSD, discuss emerging evidence-based therapies for CPTSD, and consider the diversity of symptoms, ongoing stressors, and comorbidities associated with both disorders.

Keywords: CPTSD, PTSD, Complex Trauma, ICD-11

KNL/2: Advancing Trauma-Focused Cognitive Behavioral Therapy in Diverse and Challenging Asian Contexts

Keynote Speaker: Dr. Meera Bahu
Country: UK

Meera Bahu's keynote, titled "Advancing Trauma-Focused Cognitive Behavioral Therapy (CBT) in Diverse and Challenging Asian Contexts," serves as a timely exploration of the intricate and multifaceted nature of trauma within the Asian population. It delves into the crucial role that Trauma-Focused CBT plays in addressing the unique challenges posed by trauma in this region.

Asia, with its rich tapestry of cultures, languages, and histories, is also characterized by a higher prevalence of psychologically traumatic life events (TLEs) as compared to other regions. These TLEs encompass a wide spectrum of adverse experiences, ranging from violence and abuse to natural disasters and sudden losses. These experiences can be overwhelming, often surpassing an individual's coping capacity and leading to heightened feelings of insecurity, helplessness, and poor stress tolerance. The continuous nature of trauma in Asia adds an additional layer of complexity, necessitating therapeutic solutions tailored to the region's specific needs.

The keynote critically evaluates the application of Trauma-Focused CBT within this unique context. It emphasises the crucial importance of cultural sensitivity and adaptation, recognising that therapeutic models rooted in Western perspectives may not seamlessly align with the rich diversity of Asian cultural beliefs and practices. Drawing from Meera Bahu's extensive research spanning more than a decade, as well as her ongoing work, the presentation explores the findings and adaptations of CBT techniques that are better suited to the needs of the patients.

The presentation encompasses the latest theory and practice-based frameworks and encourages a call to action. It highlights areas where Trauma-Focused CBT may require further research and adaptation to enhance its effectiveness in addressing the intricate challenges posed by continuous trauma. The talk serves as an invitation to practitioners, researchers, and experts to collaborate in the ongoing refinement and expansion of the therapeutic framework. Ultimately, the goal is to bolster mental health practices and resilience amongst practitioners across the diverse and challenging Asian landscape

KNL/3: Stabilizing Chaos: Fostering Psychological Resilience in the Wake of Crises, Adversity, and Trauma

Keynote Speaker: Prof. (Dr.) Lata K. McGinn

Contact: lata.mcginn@yu.edu

Country: USA

The COVID-19 pandemic is an unrelenting global crisis that has unleashed a cascade of events across the world and a mental health tsunami, the likes of which we have not seen. The Russian invasion of Ukraine is also leading to unimaginable loss, destruction, and disruptions in its wake for the people of Ukraine, surrounding regions in Europe, and the world. Climate changes leading to increasingly severe and unpredictable weather patterns including hurricanes, floods, and droughts, are wreaking emotional havoc and community destruction. For many in our communities who continue to be impacted, the risk of developing clinically significant psychological symptoms such as chronic anxiety, grief, depression, and PTSD is high. Based on the concept of human resilience, Psychological First Aid (PFA) is a universal evidence-based approach that helps people effectively cope in the aftermath of adverse events and crises and helps reduce the emergence of clinically significant symptoms. Research demonstrates that resilience is the most common outcome in the face of adversity but that the risk of developing clinically significant symptoms depends on several factors including the severity, chronicity, and proximity of the crisis faced as well as the personal vulnerabilities we bring to the table. For those who develop psychological illnesses, a variety of specialized interventions exist such as prolonged exposure, cognitive processing therapy, and cognitive therapy. Understanding how traumatic events impact us, who are at risk for developing psychological illnesses and

learning the differences between normative and pathological symptoms is the next step in managing the aftermath of such crises.

This presentation will provide professionals with the necessary information to understand traumatic events what factors lead to risk and resilience, and how evidence-informed strategies can help build resilience mental in the aftermath of the pandemic and other adverse and traumatic crises that are common in our lives, prevent the onset of clinically significant symptoms and foster adaptive coping.

Learning Objectives: After this presentation, participants will be able to: 1. Understand what constitutes adverse and traumatic events; 2. Learn about common trauma reactions and risk and resilience factors; 3. Understand Psychological First Aid (PFA) during crises, and adverse and traumatic events to build resilience.

KNL/3: What We Got Wrong about Depression: An Evolutionary Perspective

Keynote Speaker: Prof. (Dr.) Steven Hollon

Contact: steven.d.hollon@vanderbilt.edu

Country: USA

Much of what we once believed about depression has turned out not to be true. Although it is miserable to experience, depression is neither a disease nor a disorder but is instead an adaptation that evolved in our ancestral past to serve a purpose. The evolutionary theory that is most consistent with the existing evidence is that depression evolved to facilitate the kind of careful thinking needed to resolve complex interpersonal problems. Moreover, recent birth cohort studies indicate that depression is far more prevalent than previously recognized (it is “species typical”) and that only a small percentage of the persons who ever get depressed ever go on to become recurrent. It is a basic principle of evolutionary medicine that any treatment that facilitates the functions that an adaptation evolved to serve is to be preferred over one that only anaesthetizes the symptoms. As efficacious as antidepressant medications can be, they are purely palliative at best and may even have an iatrogenic effect that suppresses symptoms at the expense of prolonging the underlying episode. The cognitive and behavioral interventions not only have enduring effects but appear to facilitate the resolution of complex interpersonal problems and are therefore likely to be preferred over purely palliative (and possibly iatrogenic) medications.

KNL/4: Five decades of research on CBT for depression: Lessons learned and challenges for the future

Keynote Speaker: Dr. Pim Cuijpers

Contact: p.cuijpers@vu.nl

Country: Netherlands

More than 400 randomized controlled trials including more than 50,000 patients have examined the effects of cognitive behaviour therapy (CBT) for depression and compared CBT with control conditions, with other therapies, with pharmacotherapy and with combined treatments. These trials have also examined the effects of CBT in specific target groups, such as women

with perinatal depression, children and adolescents, older adults, people with general medical disorders and many others. Furthermore, the effects have not just been examined on depressive symptoms, but also on other outcomes, such as quality of life, functional limitations and social support. In this presentation, I will present the results of a large meta-analytic project in which new trials are continuously added. I will show that CBT is by far the best examined type of therapy, that it is effective, but that it is not more effective than other therapies, that these effects remain significant up to one-year follow-up and that CBT is effective in most specific groups. But meta-analyses should also be considered with caution because they overestimate the effects of therapies. The effects of CBT are comparable to those of pharmacotherapy, but at the longer term CBT and other psychotherapies are more effective. Combined therapy is more effective than either one alone, in the short and longer term.

KNL/4: Cognitive-Behavioural Therapy: The cognitive-behavioural revolution is over, long live the cognitive-behavioural revolution

Keynote Speaker: Prof. Paul Salkovskis

Contact: paul.salkovskis@hmc.ox.ac.uk

Country: UK

Cognitive-behavioural therapy (CBT) has emerged as the leading evidence-based and empirically grounded approach to psychotherapy. It did this in a series of historical “breakthroughs” which resulted in the transition from Behavior Therapy to the suite of approaches which characterize contemporary CBT. The application of CBT has far transcended the areas in which it originated (common mental health problems such as anxiety and depression). Developments include transdiagnostic, pan-diagnostic and non-diagnostic approaches. The diagnosis-specific approaches have been refined to the point where effective elements have become clearer and therapy therefore more economically and practically viable. CBT therefore faces challenges which transcend its European and American origins.

In this talk, I will consider what lessons have been learned over the past 50 years that might still be relevant today and may be more broadly relevant, for example to the Asian context. I will propose some illustrative examples. I will also consider where further breakthroughs may occur, not only in terms of the further development of CBT, but also in terms of (1) the adaptations to the varied settings where people seek help for psychological issues and (2) the cost-effective dissemination of such approaches, with effectiveness rather than cost as the main driver. I will suggest that the global challenges we face require adaptation rather than translation, empowerment and collaboration rather than “colonization”.

KNL/5: The Treatment of Depression: Integrating Current Models of Risk and Resilience

Keynote Speaker: Dr. Keith Dobson

Contact: ksdobson@ucalgary.ca

Country: Canada

Many of the existing psychosocial treatment manuals in the field of depression offer a particular conceptual model and an associated set of interventions. Often, these manuals are evaluated in

clinical trials, and evidence is gathered about their relative efficacy. Unfortunately, the evidence reveals that critical information about risk and resilience is not included in most psychosocial treatment manuals. In some cases, this information appears to be purposely neglected if these factors do not conform to the theoretical model that is being advanced. In this invited talk a comprehensive biopsychosocial framework for depression will be introduced and the literature on risk and resilience will be briefly reviewed. Based on this information, it will be argued that our current CBT models for depression are incomplete and that they need to be supplemented with a more integrated and fulsome set of interventions. Directions for this development will be provided, and the presentation will include a general invitation for the expansion of CBT models for depression. The implications of this expansion for research and evaluation, as well as training and credentialing, will be highlighted.

KNL/6: Empowering Youth: Celebrating Culture and the Art of Cultural Adaptation of Cognitive Behaviour Therapy

Keynote Speaker: Prof. Shanaya Rathod

Contact: shanaya.rathod@circlehealthpartners.co.uk

Country: UK

Cognitive Behaviour Therapy (CBT) is the most widely recommended psychological intervention for mental health problems in the United Kingdom (e.g. NICE 2014) and many other countries. However, explanations used in CBT have been criticized as being based on Western concepts and illness models. We know that culture significantly impacts all aspects of mental illness - commencement, psychopathology, course, treatment approaches and outcomes. Despite this, little attention is given to modifying the therapeutic framework and practice of therapy to incorporate an understanding of diverse ethnic, cultural and religious contexts (Rathod et al, 2008).

Prof Rathod will present her pioneering work in developing and testing a culturally adapted CBT framework in the UK (Rathod et al. 2010; 2013; 2015) that has led to a programme of successful trials of culturally adapted CBT across the world. A body of evidence is now developing, and she will discuss the impact of cultural adaptation of CBT from the perspective of empowering youth.

References:

Rathod et al. (2015). Cultural Adaptation of CBT for Serious Mental illness: A guide for training and practice. Wiley–Blackwell.

Rathod, S. Phiri, P. Naeem F. An evidence-based framework to culturally adapt cognitive behaviour therapy. *The Cognitive Behaviour Therapist*, 2019, Vol 12.

Rathod, S. Gega, L., Degnan, A., Pikard, J., Khan, T., Hussain, N., Munshi, T., Naeem, F. (2017). The Current Status of Culturally Adapted Mental Health Interventions: A Practice-Focused Review of Meta-analyses. *Neuropsychiatric Disease and Treatment*; Dove Medical Press.

KNL/7: Cognitive Behavioral Therapy (CBT) Training and Supervision: A SWOT Analysis on its Implications for Practice and Development

Keynote Speaker: Prof. (Dr.) Firdaus Mukhtar

Contact: drfirdaus@upm.edu.my

Country: Malaysia

Cognitive Behavioral Therapy (CBT) is a widely recognized and empirically supported psychological intervention used for various mental health disorders globally. Effective delivery of CBT relies not only on the skills of therapists but also on comprehensive training and supervision programs. World Confederation of CBT has recently announced the training guideline that could be an optimal standard of requirement for CBT training. This SWOT analysis underscores the importance of addressing the identified challenges while capitalizing on opportunities to enhance the accessibility, quality, and cultural relevance of CBT training and supervision worldwide. By leveraging collaborative partnerships, embracing technological innovations, and prioritizing cultural sensitivity, stakeholders can work towards strengthening the global CBT workforce and improving mental health outcomes for diverse populations. This presentation will highlight a SWOT (Strengths, Weaknesses, Opportunities, and Threats) analysis of CBT training and supervision worldwide, aiming to provide insights into its current status and future directions.

KNL/8: Global Socio-Economic/ Environmental Changes and the Impact on CBT Practice.

Keynote Speaker: Dr. Krish Nath

Contact: krishnath@msn.com

Country: UK

Over the last two decades, WHO (The world Health Organisation) have reported widely on the significant increases in the global prevalence of mental health conditions. Current prevalence is estimated at 1 in 10 for all mental health conditions and 1 in 4 for anxiety/depression. Forced lifestyle changes, poverty, excess in consumerism, work demands with reduced time out for leisure and relaxation are some of the reasons cited for the significant increase in mental ill health. Global economic and technological changes where everyone is selling a commodity or service and everyone is a consumer of services and goods, in other words, we have all become salespeople and consumers. Freedom is expressed in terms of having the right to choose what we buy and what we sell; the balancing act of buying and selling is controlled by the principles of supply and demand. CBT is now widely practised and delivered as the therapy of choice, informed by the scientific literature and efficient in delivery. However, the same rights and

responsibilities govern its delivery. This presentation examines the impact of the practice and the expectations and increased responsibilities of practitioners and educators.

Cultural Adaptation of CBT in Preventing Anxiety and Depression in Young People

Keynote Speaker: Prof. (Dr.) Cecilia A. Essau

Contact: essau@roehampton.ac.uk

Country: UK

Anxiety and depression affect up to 32% of young people in the general population. In addition to being prevalent, anxiety and depression tend to co-occur highly with numerous other mental disorders. When left untreated, anxiety and depression that begin early in life can become chronic and are often associated with a negative course and outcome. CBT has been considered the gold standard treatment of choice for youth anxiety and depression with a large amount of research confirming its efficacy. Despite the presence of effective CBT interventions for anxiety and depression, the number of young people with these disorders who received mental health services is low.

In this lecture, I will present the development and cultural adaptation of our "Super Skills for Life" (SSL). SSL is a manualized transdiagnostic 8-session cognitive-behavioral skills-building programme guided by the principles of CBT, behavioural activation, and social skills training. It also includes activities to promote healthy lifestyles, including sleep hygiene, increasing physical activity and healthy food consumption. SSL is developed in an effort to increase access to evidence-based programme to prevent the development of youth anxiety and depression, especially in low- and middle-income countries. SSL has also been co-adapted to support young people cope with academic stress as they prepare for their national examinations. By utilising a 'train-the-trainer approach', the SSL training has built the capacity and shaped the practice of 25,000 practitioners and has produced positive mental health outcomes in about 700,000 young people.

Understanding and Treating Body Dysmorphic Disorder

Keynote Speaker: Prof. David Veale

Contact: david.veale@kcl.ac.uk

Country: UK

Body Dysmorphic Disorder (BDD) is defined as a preoccupation with a perceived defect in one's appearance, which is not noticeable to others. The preoccupation is associated with a distorted felt body image with many "safety seeking" behaviours such as mirror gazing, skin-picking, ruminating or constant comparing of one's perceived defect to others. People with disfigurements and BDD use strategies to camouflage and avoid situations and activities. They may have a poor quality of life, are socially isolated and people with BDD are at high risk of committing suicide. Cognitive behaviour therapy and SSRI medications are recommended for treating BDD. CBT can be used for body image problems in disfigurement and eating disorders. Habit reversal is recommended for skin picking. A cognitive behavioural model of BDD focuses on the processes that maintain the symptoms including comparing; ruminating; being

excessive self-focused; camouflaging one's appearance; and monitoring and avoiding social threats such as shame, rejection and ridicule from others. The key in therapy is engagement and with a focus on reducing ruminating and comparing, dropping avoidance and safety seeking behaviours and imagery rescripting for aversive memories.

Phillips, K (2017) *Body Dysmorphic Disorder: Advances in Research and Clinical Practice*. Oxford.

Veale, D. & Neziroglu (2010) *Body dysmorphic disorder: a treatment manual* Wiley: Chichester. <http://dx.doi.org/10.1016/j.jocrd.2013.11.005>

Veale, D., Willson, R, Clarke, A. (2009) *Overcoming Body Image Problems (including BDD)*. Robinson.



ACBTA 2024 NEW DELHI SCIENTIFIC PROGRAM

INVITED TALKS



INVITED TALKS

IT/1: What is SE? How to use SE and CBT for patients with complex PTSD

Speaker: Keiko Tsuchida

Country: Japan

Abstract: Traditional talk therapy approaches have limitations in treating complex PTSD. Because, as Van der Kolk says, the body records trauma. Just talking is not enough. Working with the body is also very important in the CBT approach. Therefore, I approach Complex PTSD using Somatic Experiencing, CBT, and in some cases EMDR. CBT takes a cognitive approach and primarily works with the emotional brain. In addition, expanding the approach to the senses directly connected to the brainstem increases its effectiveness. In addition, by using Somatic Experience as a base, you can approach titration more smoothly and safely. We believe that CBT becomes more effective when combined with somatic approaches such as somatic experiencing and sensory psychomotor therapy. Today I will introduce SE and my case study of using SE and CBT together. This case is about a DID patient.

IT/2: CBT for Patients with PTSD in Japan: ideas to facilitate dissemination

Speaker: Misari Oe

Country: Japan

Abstract: According to international guidelines, the first-line treatment for PTSD is CBT-based psychotherapy. In Japan, randomized controlled trials of prolonged Exposure (Asukai 2010) and trauma-focused CBT (Kameoka 2020) have been completed. In addition, a randomized controlled trial of cognitive processing therapy is about to publish its results (Ito 2017). These results indicate the effectiveness of trauma-focused therapies as well as results in Europe and the United States.

However, it is difficult to apply the results of these RCTs to the real world of clinical practice (Schnyder 2016). In Japan, only the treatment by psychiatrists is covered by health insurance, and there is an unsatisfactory system to provide easy access to interviews with clinical psychologists. In addition, many technical terms are difficult to understand in Japanese. Therefore, it is necessary to adapt to the Japanese culture by providing psychoeducation based on CBT in a short period of time during psychiatrists' practice, or by preparing a booklet to introduce the content of CBT before full-scale CBT is introduced.

Our research group has developed several psychoeducational materials (15 minutes per session, completed in four sessions) for trauma-related disorders and published a book explaining these materials (Oe ed. "How to convey trauma" 2021). In addition, we have created a cartoon to support cognitive processing therapy and a cartoon about present-centered therapy, which has been shown to be effective in PTSD. Ideas that fit the Japanese style of medical practice would be useful for the dissemination of CBT.

IT/3: CBT Beyond DSM: Recent Advances in Transdiagnostic Approaches to the Cognitive Behavioural Treatment of Anxiety and Depressive Disorders

Speaker: Professor Peter J. Norton

Country: Australia

Abstract: Transdiagnostic models of anxiety and depressive disorders (hereafter termed Negative Emotional Disorders), and cognitive-behavioural treatments based on these models, have been gaining considerable support as effective and easy to adopt. Transdiagnostic models hold that common elements across anxiety and emotional disorders outweigh differences. From these models, treatments have been developed which incorporate different emotional diagnoses under the same protocol. Recent research from several clinical trials has shown that Transdiagnostic Cognitive-Behavioural Therapy is efficacious and highly economical for treatment providers. Further, a majority of patients present with two or more “comorbid” diagnoses at once. Given that Transdiagnostic CBT focuses on the patient’s entire emotional presentation, as opposed to just one primary diagnosis, psychological scientists have suggested that Transdiagnostic CBT may be more efficient than traditional CBT in treating comorbid presentations (those with more than one anxiety disorder or depressive diagnosis). The presentation will present a state-of-the-art relating to transdiagnostic CBT for anxiety and emotional disorders. Future directions for the treatment of complex comorbid anxiety and anxiety-depression patients will be discussed.

IT/4: Engaging depressed adolescents using Brief Behavioural Activation (Brief BA)

Speaker: Prof. Shirley Reynolds

Country: UK

Abstract: It’s difficult to engage young people with depression and almost 50% either do not attend or drop out prematurely. Therapy is only effective if young people engage so it is urgent to develop treatment that young people will use. To make treatment brief, engaging, simple, and effective we adapted Behavioural Activation for the Treatment of Depression (BATD; Lejuez, et al., 2011) specifically for teenagers. Parents, young people and therapists helped design the treatment and the treatment manual.

Key elements of Brief BA for adolescents are:

- * A focus on engaging young people
- * Therapy based on developmental/cognitive constraints
- * Involvement of parents/carers
- * Focus on identifying young people’s values (what matters to you?)
- * Problem solving and contracting, with parental involvement
- * Session by session workbooks for young people and their parents

Brief BA involves 6-8 weekly sessions of up to 1 hour and a 30-minute review session one month later. Brief BA is simple to explain, easy to understand and reasonably straightforward to incorporate into an adolescent’s life. Our data show that engagement in treatment is excellent, that Brief BA is acceptable to young people, parents, and school staff, and leads to

reduced depression symptoms and improved functioning (Pass, Lejuez, & Reynolds, 2017; Pass et al., 2018).

In this workshop I will demonstrate how Brief BA is used with depressed adolescents. We will identify the barriers to treatment and focus particularly on how to engage young people, how to identify their values and link values to activities, and how to work with parents and young people, as well as relevant others including school staff. Case examples will be used to highlight specific challenges and techniques.

Training modalities: This CBT workshop will be very practical and will use instruction, group discussion, modelling and video clips

Learning Objectives:

At the end of the workshop participants will

- Understand the theoretical basis of Brief BA
- be able to engage depressed young people and their parents or carers
- help young people to identify their values (What matters to you)?
- link young people's values to activities, and planning these in daily life
- deal with conflict and disagreement between young people and parents/carers

Who the workshop is for: This CBT workshop is ideal for clinicians with experience of working with depressed young people or for anyone with experience of Behavioural Activation who would like to adapt it for use with young people.

References:

Treatment Manual:

Pass, L. & Reynolds, S. (2020). Brief Behavioural Activation for Adolescent Depression: A treatment manual for clinicians. Jessica Kingsley.

Key Texts:

Brett, S., Reynolds, S., Totman, J., & Pass, L. (2020). Brief behavioural activation therapy for adolescent depression in schools: two case examples. *Emotional and Behavioural Difficulties*, 1-13. <https://doi.org/10.1080/13632752.2020.1861853>

Lewis-Smith, I., Pass, L., Jones, D., & Reynolds, S. (2021). "... if I care about stuff, then other people care about me". Adolescents' experiences of helpful and unhelpful aspects of brief behavioural activation therapy for depression. *Psychotherapy Research*, 1-12. <https://doi.org/10.1080/10503307.2021.1898692>

Pass, L., Hodgson, E., Whitney, H., & Reynolds, S. (2017). Brief Behavioural Activation treatment for depressed adolescents delivered by a non-specialist clinician. *Cognitive & Behavioural Practice*. <https://doi.org/11.1016/cbpra.201705.003>

Pass, L., Sancho, M., Brett, S., Jones, M., Reynolds, S. (2018). Brief Behavioural Activation (Brief BA) in secondary schools: A feasibility study examining acceptability and practical considerations. *Education and Child Psychology*, 35 (2) <https://centaur.reading.ac.uk/77759>

Watson, R., Harvey, H., Pass, L., McCabe, C., & Reynolds, S. (2020). A Qualitative Study Exploring Adolescents' Experience of Brief Behavioural Activation for Depression and

IT/5: Advances in Digital therapeutics in Asia

Speaker: Kyong-Mee Chung

Country: South Korea

Abstract: Since the US FDA approved reset-O in 2017 as the world's first CBT app, proactive investment and development of digital therapeutics have been observed in countries such as the United States and Germany. However, development in Asian countries, while varying from nation to nation, is relatively less active. This presentation examines the digital therapeutics market and current status in Asian countries, as well as the market size and development status of a few countries with active digital therapeutics markets, along with government support. It also discusses future directions. Simultaneously, since CBT is a major content in digital therapeutics, considerations for implementing CBT into mobile apps will be shared

IT/6: Conceptualization in cognitive behavioral therapy focused on needs

Speaker: Dmitrii V. Kovpak

Country: Russia

Abstract: This review article is devoted to the presentation of the results of the long-term work of the working group of the Association of Cognitive Behavioral Psychotherapy on the conceptualization of the role and function of needs in therapy in general and its cognitive behavioral approach in particular in the form of needs-based therapy. Needs—based therapy is a systematic approach to the treatment, change and development of a person based on adaptive, functional and constructive strategies to meet his leading needs. Conceptualization based on needs is intended to introduce into traditional types of conceptualization an extension of the model of the genesis of core beliefs and schemes using reliance on needs and the division of needs into three domains in the context of the biopsychosocial model of G. Engel. This model allows us to consider the genesis and development of dysfunctional beliefs and thoughts at all levels in close relationship with the unsatisfied (frustrated) needs of the sensitive period of development (significant childhood data) and the whole of life (significant life data), to use a more accurate collection of information on the context of various systems at different levels.

Keywords: cognitive model, cognitive conceptualization, biopsychosocial model, conceptualization based on needs, needs-based therapy

The cognitive model proposed by A. T. Beck as a methodological basis for cognitive behavioral therapy becomes a structural basis for diagnosis, including its systematization in the form of cognitive conceptualization. From the linear connections of the cognitive model in cognitive conceptualization, we move on to the nonlinear and systemic connections presented in the diagram of cognitive conceptualization by J. Beck. To date, the traditional problem-oriented conceptualization of J. Beck (1993) supplemented by the strength-based cognitive conceptualization diagram by J. Beck (2018, 2021 [2]). The diagram of cognitive

conceptualization reflects a system of complex interrelations of human mental constructs and the external manifestation of their functioning in the form of his phenomenologically recorded emotions and behavior. The basis of the diagram of cognitive conceptualization and the belief system reflected in it are a core beliefs (represented as a "Self-concept" and reflected in characteristics starting with the personal pronoun "I") and relevant data of life and childhood associated with their formation.

Self-concept (also called self-construction, self-identity, self-perspective or self-structure) is a collection of beliefs about oneself. Self-concepts are not innate, but represent the result of learning in the form of complex conditioned reflexes of the second signaling system. The categories of core beliefs can be considered separately as integral elements of learning.

Following the logic of their structuring in the conceptualization of the data collected about the clients, we (working group of the Association for Cognitive Behavioral Psychotherapy on the conceptualization of the role and function of needs in therapy in general and its cognitive behavioral approach in particular in the form of needs-based therapy) propose to register they needs, with the help of which we come to the connections and genesis of not only mental constructs serving core beliefs, such as compensatory strategies, intermediate beliefs, schemes and modes, but also to the genesis of the core beliefs themselves, schemes and proto-schemes that arose at one time, in connection with the satisfaction or dissatisfaction (frustration) of actual human needs.

Thus, we consider it necessary to register data in conceptualization regarding satisfied and frustrated needs both in the past and actual realized or unrealized needs in the present.

Need is a condition inherent in living organisms, expressing their dependence on objective conditions of existence and development, which acts as a source of motivation and motivators for various forms of their activity. Human needs represent the most ambiguous category of research and are determined, in addition to the first signaling system shared with animals, by the presence of a complex mental organization represented by the second signaling system — thinking and speech.

In the cognitive behavioral approach of therapy, needs were written about by W. Glasser in the 80s of the twentieth century. Then, in the scheme of therapy, J. E. Young, A. Arntz, J. M. Farrell, I. A. Shaw, but they emphasized emotional needs, specifically singling it out among other groups of needs.

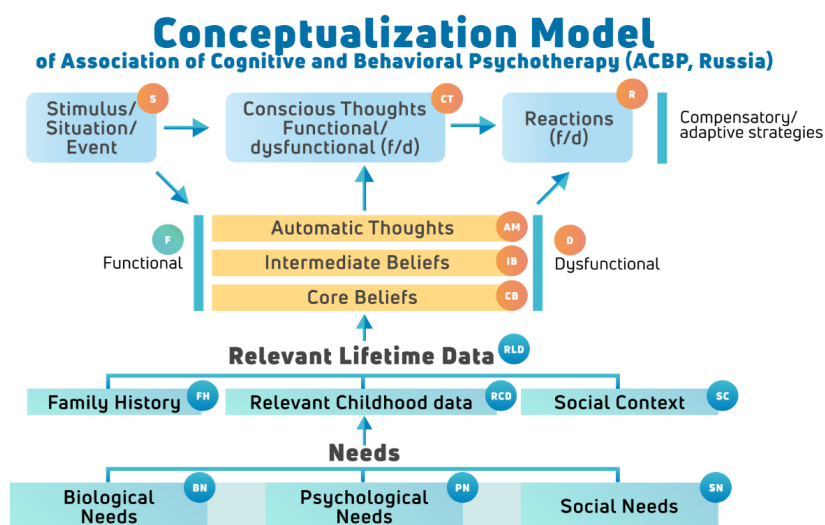


Fig. 1 Conceptualization based on needs (Kovpak D. V., 2020. 2023)

Conceptualization based on needs (Fig. 1) is intended to introduce into traditional types of conceptualization an extension of the model of the genesis of core beliefs and schemes using reliance on needs and the division of needs into three domains in the context of the biopsychosocial model of G. Engel. This model allows us to consider the genesis and development of dysfunctional beliefs and thoughts at all levels in close relationship with the unsatisfied (frustrated) needs of the sensitive period of development (important relevant childhood events and significant childhood data) and the whole life (important relevant life events and significant life data), to use a more accurate collection of information on the context of various systems at different levels, including supersystems, which include an open personal the human—family system as a system (microsocium) and a system of macro-society (collective, ethnos, country, population, humanity, civilization). The biological domain includes the need for survival (including the consumption of nutrients, water, oxygen, etc.) and the preservation of physiological well—being, the need for safety and other biological needs, the psychological domain includes the need for cognition, development and emotional needs (pleasure, love, play, etc.) and other psychological needs, The social domain includes the need for interaction, communication, belonging (recognition, acceptance, belonging) and other social needs. The originality of the presented conceptualization lies, among other things, in the use of a biopsychosocial model of needs integrated into a complex model of cognitive conceptualization. This makes it possible to represent at the model level the human phenomenon as a complex, open dynamic system and its genesis.

Conceptualization is the basis for a therapy plan, allowing you to more consciously, step-by-step and purposefully achieve the tactical and strategic goals of therapy. In terms of needs-based therapy, the strategy implies the formation of ways to realize the leading needs and skills necessary for their realization. When this goal is achieved, the mechanisms of etiopathogenesis of disorders and the genesis of problems associated with dysfunctional ways of meeting the needs that the patient or client sought help with are eliminated.

Needs-based therapy is the development of concepts of the cognitive behavioral direction of psychotherapy, designed to improve the quality of diagnostic and therapeutic processes based on further scientific research on the genesis and possibilities of changes in the human belief system, their genetic, epigenetic, phenotypic, psychophysiological, neurosemantic and cultural-historical basis.

References:

1. Beck, A. T. (2019). A 60-year evolution of cognitive theory and therapy. *Perspectives on Psychological Science*, 14(1), 16–20.
2. Beck J. S. *Cognitive Behavior Therapy. Basics and Beyond.* — 3rd ed. — New York: The Guilford Press, 2021.
3. Engel GL (April 1977). "The need for a new medical model: a challenge for biomedicine". *Science*. 196 (4286): 129–136. Bibcode:1977Sci...196..129E. doi:10.1126/science.847460. PMID 847460.
4. Kovpak D. V. Evolution of the concept of cognitive behavioral psychotherapy // *Psychological and psychiatric problems of clinical medicine. Collection of scientific papers dedicated to the 100th anniversary of the Department of Psychiatry and Narcology of St. Petersburg State Medical University named after Academician I. P.*

- Pavlov. — St. Petersburg: Publishing House of St. Petersburg State University, 2000. — pp. 203-205.
5. Kovpak D. V. Practical methodology of cognitive behavioral therapy // I International Congress of the Association of Cognitive Behavioral Psychotherapy: collection of scientific articles. — St. Petersburg: SYNEL, 2015. — pp. 23-28.
 6. Kovpak D. V. Diagnostics in cognitive behavioral therapy // VII International Congress of the Association of Cognitive Behavioral Psychotherapy: collection of scientific articles. — St. Petersburg: SYNEL, 2021. — pp. 100-116.
 7. Kovpak D. V. Needs-oriented cognitive behavioral therapy // XIIX International Congress of the Association of Cognitive Behavioral Psychotherapy: collection of scientific articles. — St. Petersburg: SYNEL, 2023.
 8. Simonov P. V. Lectures on the work of the brain. Need-information theory of higher nervous activity. — M.: Institute of Psychology of the Russian Academy of Sciences, 1998.
 9. Simonov P. V. Selected works. Vol. 1: Brain, emotions, needs, behavior. — M.: Nauka, 2004.
-

IT/7: Humanism in Cognitive Behavior Therapy

Speaker: Dr. Allen Miller

Country: USA

Abstract: Cognitive Behavior Therapy (CBT) is widely recognized for its scientific approach to developing evidence-based techniques for treating mental health conditions. Less often referenced are the embedded humanistic features of Dr. Aaron T. Beck's earliest works. Client-centred features of unconditional acceptance, understanding, collaboration, and feedback were inextricably linked to the effective application of evidence-based techniques. Over time, client-centred elements of treatment earned their own evidentiary support for predicting therapeutic outcomes. In the latter part of his career, Dr. Beck focused greater attention on strength-based conceptualizations that are used to help individuals achieve their personal aspirations. This talk will focus on the humanistic principles and practices embedded in the application of the Beck Model of CBT.

IT/8: Harnessing the potential of personalised mental health treatment for children with anxiety disorders.

Speaker: Prof. Jennie Hudson

Country: Australia

Abstract: Anxiety disorders are among the leading global causes of burden of disease in young people. Although typically emerging in primary school, anxiety disorders are often not identified until adolescence or adulthood, when comorbidity is greater, and symptoms are

harder to treat. There is overwhelming evidence, with over 279 randomised clinical trials showing that early access to good quality treatment allows children's mental health problems to be resolved quickly, avoiding prolonged disruption to their educational and social development. One of the major limitations is that each of these trials is typically powered to determine the answer to a singular question, does one treatment performs better than another? Although researchers have attempted to examine moderators using post hoc analyses, most attempts to examine post-hoc moderation effects fail. As a result, we are no closer to answering Gordon Paul's question from the late 60's: "What treatment, by whom, is most effective and under which set of circumstances." To address this solution, we have harnessed existing data from existing clinical trials to build personalised models of care, with the ultimate goal of being able to increase access to high quality treatment early in life.

IT/9: Expressive cultural adaptation in cognitive behavioral therapy for children and adolescents in Asia

Speaker: Shin-ichi Ishikawa

Country: Japan

Abstract: While the efficacy of cognitive behavioral therapies (CBT) for children and adolescents with emotional disorders has been supported by numerous clinical trials, there remains a need for further cultural adaptation and dissemination of CBT in Asia. Therefore, this presentation focuses on the cultural adaptation of CBT, using the example of its adaptation for Japanese children and adolescents with anxiety disorders. First, we focus on the bidirectional approach among the ways of cultural adaptation. This approach not only allows practitioners to adjust interventions based on indigenous feedback but also helps maintain theoretical consistency with existing evidence-based programs. Second, we present the results of a randomized controlled trial that examined the efficacy of the Japanese Anxiety Children/Adolescents Cognitive Behavior Therapy program (JACA-CBT; Ishikawa et al., 2019), developed through bidirectional cultural adaptation. The outcomes of JACA-CBT are discussed in terms of both culturally specific and universal effects of CBT. Finally, we explain a study comparing therapeutic interactions among children, parents, and therapists in Australia and Japan (Ishikawa et al., 2022), from the standpoint of expressive cultural adaptation. Expressive cultural adaptation explores the commonalities and differences in how step-by-step interactions with clients are expressed in the two countries and how these interactions affect treatment outcomes. Through this series of studies, the speaker will discuss the clinical implications of cultural adaptation of CBT for Asian countries.

IT/10: Unusual Experiences in CBT for Anxiety and Depression

Authors: Dr. Elizabeth Graves

Country: United Kingdom

Abstract: Observational longitudinal study of patients identified as meeting criteria for treatment within CBT talking therapy services in the UK for depression and/or anxiety, who also report 'At Risk Mental States' (ARMS). This study aims to determine prevalence and

characteristics of this group. ARMS experiences include unusual experiences such as seeing or hearing things that other people do not see or hear, and have been linked to increased risk of subsequent psychosis in around a third of people. This study will report on prevalence rates and compare sociodemographic and clinical characteristics, and recovery rates, for people accessing CBT Talking therapy services who do and do not meet ARMS screening criteria.

Keywords: CBT for Anxiety and Depression, Early Intervention in Psychosis, At risk mental states

IT/11: Culturally adapted CBT: The Evolution of psychotherapy adaptation frameworks and evidence

Speaker: Dr Peter Phiri

Country: UK

Abstract: Culture significantly influences psychotherapy, with the increasing globalisation and cultural awareness driving the implementation of cultural adaptations in therapeutic practices. This talk will examine the evolution of cultural adaptation in psychotherapy by summarising and critiquing existing frameworks, reviewing the efficacy of culturally adapted interventions, and identifying future research directions. To date, approximately twenty frameworks have been developed to guide the cultural adaptation of psychosocial interventions, incorporating diverse population demographics and types of interventions. These frameworks typically build on existing literature, and some have been refined through stakeholder consultations, randomised controlled trials, and pilot studies. Despite the identification of various cultural adaptation factors, consensus on the most effective elements remains elusive. Evidence suggests that culturally adapted interventions are generally effective across different intervention types and populations. However, despite the prevalence of cognitive behavioural therapy (CBT) in research trials, there is a notable absence of comprehensive, high-quality meta-analyses or systematic reviews on culturally adapted CBT that encompass all relevant literature. This gap underscores the need for a thorough understanding of the current state of culturally adapted psychotherapy. The talk will conclude with recommendations for researchers, trainers, and policy makers in the field.

References:

Naeem F., Sajid S., Naz S., Phiri P (2023). Culturally adapted CBT – evolution of psychotherapy adaptation frameworks and evidence. *The Cognitive Behaviour Therapist* vol.16, e10, page 1-21

IT/12: Pandemic Preparedness for Healthcare Professionals and Researchers: EPIC project

Speaker: Dr Peter Phiri

Country: UK

Abstract: Purpose: This study introduces a novel framework aimed at enhancing workforce preparedness in clinical trials units (CTUs) during pandemics.

Method: The framework was devised based on a comprehensive analysis of qualitative and quantitative data from the EPIC observational study. Through a systematic framework methodology, key themes and sub-themes were identified and supported by illustrative quotes, while a logic model incorporating spatial features was constructed. The qualitative analysis included insights from six semi-structured interviews, highlighting the necessity for adaptable working conditions, improved operational management, and remote access to electronic data systems.

Results: Implementing the proposed framework could mitigate the mental health impacts on CTU staff by streamlining research operations, offering flexible work arrangements, and enhancing access to health and well-being resources.

Conclusion: The findings underscore the need for targeted funding to support workforce-centric research within the UK, with the goal of developing robust, evidence-based policies for better pandemic preparedness in the context of clinical trials.

Keywords: Clinical Trials, Pandemic Preparedness, CTU Workforce, Frameworks

IT/13: Working with Interpreters in Mental Health

Speaker: Professor (Dr) Rachel Tribe

Country: UK

Abstract: 184 million people were recorded as having migrated across national borders by the United Nations in 2022, this equates to approximately 3.6 per cent of the world's population. A larger number will have moved to another area within their original country. A percentage of these people will not speak the language of their new country fluently. If they are to access and utilise mental health services, they will require access to an interpreter. This presentation/workshop provides guidance on working with interpreters in health settings when the work is either face-to-face or online. These guidelines are based on those written by the authors and a colleague for the British Psychological Society.

Working effectively with interpreters should be a skill in the repertoire of every clinician. This is to ensure that equal opportunities are upheld and that certain groups are not denied access to mental health services. Interpreters may also assist with teaching clinicians about diverse cultural views surrounding mental health and well-being. They may also advise on idioms of distress, cultural meanings and expression of emotional problems across cultures, explanatory health models and contextual factors which may help extend the repertoire of clinicians. The guidelines cover key recommendations for practice, booking and finding an interpreter, preparation before the consultation/ meeting, practical considerations, preparation with the interpreter, during the meeting/consultation, issues to address after the meeting, written translations, psychometric testing, working by telephone or online and other issues to consider when working with an interpreter.

Keywords: Interpreter, mental health, language, culture

IT/14: Therapy for All or just the Elite? Recommendations to improve access and engagement for all

Speaker: Deepak Dhuna

Country: UK

Abstract: The majority of Asian healthcare systems rely on private clients accessing support for better mental health. This elite population enjoys the benefits of private funds, educational advantages and the level of articulation associated with talking therapies. By comparison, there are a majority of individuals who may not have a disposable income and may have not enjoyed the same educational opportunities. They may not ascribe to a medical model of understanding mental health, and may not appear 'psychologically minded'. This majority is suffering the most by not being able to access psychologically informed care. However, this thought-provoking talk draws upon a wealth of research and considers how to improve access and engagement for all (Ngui, 2010), considering variables such as systemic inequality, paradigm shifts and individual adaptations. The talk also explores gender differences (Yu, 2018), themes of power, privilege, stigma and discrimination are additionally explored. It is hoped to delve deeper into how we can use our position as professionals to support the mental well-being of the population we serve.

IT/15: Standards in CBT Practice, Training & Supervision in Nepal: An Overview

Speaker: Dr. Mita Rana

Country: Nepal

Abstract: The presentation is an overview of Cognitive Behavioral Therapy (CBT) in Nepal, with a focus on its historical context, academic framework, research, ongoing training initiatives, and pertinent issues within the field. The presentation begins by tracing the evolution of psychology, clinical psychology, psychiatry, and mental health services.

Within the academic courses in psychology, counseling and mental health, the presentation examines coursework related to CBT at the bachelor's level, postgraduate diploma programs in counseling, and master's level studies in psychology. The presentation looks into ongoing research and training efforts in CBT within Nepal, highlighting the contributions made by scholars and practitioners.

Addressing core challenges, the presentation examines the qualifications required for providing CBT services and explores the nuances of CBT versus other counseling approaches. It emphasizes the need for clarity and standardization in this rapidly growing field. Furthermore, the presentation addresses the potential of forming an association of CBT in Nepal. It opens up discussions of having a specialized wing within existing professional associations versus the formation of an independent entity.

IT/16: Empowering Mental Health Professionals in Nepal: Creating a Basic CBT Training Model

Speaker: Dr. Suraj Shakya

Country: Nepal

Abstract: In Nepal, the mental health scene is slowly changing, and professionals are eager to embrace evidence-based care. Cognitive Behavioral Therapy (CBT) stands out as a widely discussed psychological intervention. This presentation outlines the journey of a 40-hour CBT training program designed for students and mental health professionals in Nepal.

This training program is based on the influential works of Judith Beck, global CBT competency guidelines, and Padesky's supervision model. Elements such as content, delivery format, pedagogy, supervision structure, target trainees, logistics and certification process will be discussed in the presentation. The presentation also explores the integration of in-person and online modules, incorporating online forms and documents in the post-COVID landscape.

The training has reached over 250 participants ranging from students of psychology, counseling psychology, residents in clinical psychology, and residents in psychiatry to working mental health professionals. This presentation includes feedback from select trainees, highlighting the program's impact on their self-efficacy as a psychological service provider. Additionally, challenges such as explaining CBT concepts in native languages, adapting techniques for non-literate clients, and addressing a shortage of clinical supervisors are discussed. Finally, the presentation proposes cultural adaptation of CBT training and content using established models for psychological intervention.



ACBTA 2024 NEW DELHI SCIENTIFIC PROGRAM

SKILL CLASSES



SKILL CLASSES

SC/1: Socratic Dialogue and Guided Discovery in CBT

Skill Class Master: Dr. Prasanta Kumar Roy

Contact: prasanta.roy@gmail.com

Country: India

Abstract:

“The unexamined life is not worth living.” -Socrates

“It is better to know some of the questions than all of the answers”. – James Thurber

Objective: To have a comprehensive understanding and learning of one of the core therapeutic techniques in CBT useful for cognitive restructuring.

Micro-skill Outline:

- What are Socratic Questioning and Socratic Dialogues
- What is Guided Discovery
- Stages of Socratic Dialogue
- Goals of Socratic Dialogue: Changing Mind/Belief vs. Guiding Discovery
- How do you know what questions to ask?
- Is it only questioning?

The Process: Audio-visual presentation, Case examples, Use of Worksheets, Roleplay and Discussion

Outcome: The participants will have a clear idea about the Socratic Method and Guided Discovery. The participants even with minimum exposure to CBT will have a practical understanding of using the Socratic Method for self-discovery and helping others.

A few Socratic Questions:

- Why did you choose to join this conference?
- Why did you choose to spend so much money for the conference and travel?
- What do you already know about CBT and Guided Discovery?
- Why do you need to have a goal in mind before you select a specific question?

SC/2: Using Exposures to Treat Phobias

Skill Class Master: Dr. Krish Nath

Contact: krishnath@msn.com

Country: UK

Abstract: Exposure therapy is guided by the theories of conditioned behaviours, Pavlov's classical conditioning and Skinner's operant conditioning. Therapy is structured within a

problem-solving framework relative to the clients' s avoidant behaviors. The skills class will focus on Wolpe's Systematic desensitization and Marks. I, Graded Exposure and habituation.

Session Focus:

1. Guided Theory/ Assessment
2. Structure of therapy
3. Defining problems and goals
4. Self-directed practice and evaluation of outcome.

Active participation will be encouraged.

SC/3: Spiritual Psychology: How to engage clients with religious belief in Asia

Skill Class Master: Deepak Dhuna

Contact: sanctuarywellbeingdd@gmail.com

Country: UK

When we look to Asia, it is with reverence of its spiritual traditions. Often, therapy has supported clients as individuals without a holistic context, however this skills class aims to widen the appreciation of adaptations that could be made to engage persons within a psycho-spiritual framework. Various research has found that therapies created in the West can conflict with other cultures and belief systems on numerous elements from aetiology through to treatment and prognosis (Naeem et al, 2019). An individual's cultural values can impact on the nature of their core beliefs, assumptions and automatic thoughts (Tam et al, 2007) and therefore their mental health. Taking a rigid approach to the initial guidance without any adaptation often may result in poor outcomes, and so new research posits adaptations to CBT to ensure relevancy and accessibility for cultural minorities (Phiri, et al, 2023) is vital. Indeed, the importance of paying attention to spirituality is a key element in ensuring positive health outcomes (Katerndahl, 2008). This session will explore to how to assess, conceptualise and treat the followers of some of the major religions in Asia. Considerations will be made around Islam, Hinduism, Christianity, Buddhism, Sikhism and others, drawing on salient themes and techniques which may help alleviate mental distress in a more meaningful way.

SC/4: CBT for Vaginismus

Skill Class Master: Prof. (Dr.) Firdaus Mukhtar

Contact: drfirdaus@upm.edu.my

Country: Malaysia

Abstract: Background & Rationale: Cognitive Behavior Therapy is an evidence-based intervention for various psychiatric disorders, including vaginismus. Most vaginismus cases were seen by medical professionals and physiotherapists. The lack of clinical psychologists who can conduct issues related to psychosexuality may be one of the reasons that patients are not getting holistic treatment in managing vaginismus. In this presentation, there will be an explanation of how Cognitive Behavior Therapy is important in managing vaginismus, a demonstration of relaxation and Kegel exercise, discussion on clinical cases to guide participants on how to run an effective session for patients with psychosexual issues.

The goal of the CBT for vaginismus that is outlined in the present skill class consists of three components:

- (i) Teaching the importance of CBT skills (breathing technique; progressive muscle relaxation; Kegel exercise) in treating vaginismus to patient and spouse.
- (ii) Modifying dysfunctional beliefs between patient and spouse that block the process of change, that is common beliefs about sex, penetration, and ability to do sexual intercourse –often based on their upbringing, stigma, and spouse’s dysfunctional beliefs about the patient commonly complicate with personal assumption and history, comparison, and distraction/addiction.
- (iii) Improving communication and problem-solving, between patient and spouse about patient’s general anxiety, fear of penetration and overall marital commitment.

Learning Outcomes: Participants will acquire the following skills:

- 1) Conducting effective exploration sessions regarding vaginismus issues towards the treatment goals
- 2) Coaching patient in guiding behavioural strategies such as relaxation skills and Kegel exercise
- 3) Identifying and challenging dysfunctional patient and spouse cognitions about the anxiety of future penetration and ability to commit in the process of treating vaginismus
- 4) Conducting hands-on sessions on drafting erotic scripts to facilitate mind control during the pre-mid-post penetration process.

Training Modalities: In this skill class, the three components of the treatment will be taught through instruction, modelling, case discussion and role-plays.

SC/5: Dialectical Behavior Therapy for Non-suicidal Self-injury

Skill Class Master: Sichu Wu, Zhengyi Li, Chun Wang

Contact: chun_wang@njmu.edu.cn

Country: China

Abstract: Rationale: Non-suicidal self-injury (NSSI) is defined as the direct and deliberate destruction of one’s body tissue without suicidal intent. Dialectical behaviour therapy (DBT) has been proven to be effective in improving NSSI. DBT, the third wave of cognitive-behavioral therapy, is a relatively new psychotherapeutic approach that has not yet gained widespread recognition as an essential treatment for NSSI. This skill class hopes to popularize DBT for the treatment of NSSI to benefit more individuals with NSSI behaviours.

Description: First, an overview of non-suicidal self-injurious behaviour is introduced, including symptom and prevalence status; followed by an overview of DBT for NSSI. Then the specific program of DBT for NSSI is introduced, including how to implement DBT for individual therapy, group therapy, family therapy, telephone counselling and supervision. One of the highlights and exercises that participants will be led to practice together is the conceptualization of a case through chain analysis and the formation of a treatment plan.

Learning objectives: Get an overview of DBT for NSSI and learn to use chain analysis to conceptualize a case and form a treatment plan accordingly.

Recommended readings: DBT Skills Training Manual and DBT Skills Training Handouts and Worksheets by Marsha M. Linehan.

SC/6: Cognitive Defusion- Detangling the ‘Busy Brain’: An ACT-based core process

Skill Class Master: Dr. Prerna Sharma

Contact: psharma19@amity.edu

Country: India

Abstract: Background: Acceptance and Commitment Therapy (ACT) encourages people to “defuse” themselves from maladaptive patterns of thinking through a process called cognitive defusion. Defusion is made up of the deliteralization of thoughts and separating behavior from internal experiences. The idea is that human beings have a tendency to over-identify with their thoughts, amplifying them in our minds to become “the truth.” When we become so attached, or fused, to thoughts in this way, it is easy to see how they can feel so very powerful. Cognitive defusion does not imply that thoughts are somehow “bad.” The ability to think and process thoughts allows us to function effectively in life. Patterns of thinking become problematic when they are causing significant distress or struggle. ACT attempts to change the way one interacts with or relates to thoughts by creating contexts in which their unhelpful functions are diminished. The result of defusion is usually a decrease in believability of, or attachment to, private events rather than an immediate change in their frequency. In other words, cognitive defusion in ACT does not restructure the precise thought rather it reframes the relationship to that thought. This technique can be empowering to clients with overwhelming anxiety, OCD or depression.

Description of class: Cognitive defusion techniques attempt to alter the undesirable functions of thoughts and other private events, rather than trying to alter their form, frequency or situational sensitivity. Many such techniques will be discussed for a wide variety of clinical presentations. The training will involve learning techniques of cognitive defusion experientially with the facilitator.

These techniques used in Acceptance and Commitment Therapy to help people cope with uncomfortable or unhelpful thoughts and feelings which are often a part of the general human experience. Techniques learnt in training will help clients identify how to create more distance from their negative thoughts, and become more mindful so they can observe thoughts rather than be overcome by them. The self-exploration of these techniques practised with the facilitator will help the participants become more aware of their emotional landscape which can further enhance their skills to practice alongside the clients. The general purpose of cognitive defusion will be to:

- Notice the true nature of thoughts.
- Respond to thoughts in terms of taking workable action – take action based on what “works” rather than what is “true”
- Notice the actual process of thinking – recognize that thoughts do not dictate behaviors
- Use cognitive defusion when thoughts are acting as a barrier to living in accordance with the individual’s true values.

Some of the techniques learnt during the workshop will be such as naming your thoughts, thought bubbles, mindful observation, singling your thoughts, metaphor creation, thanking your mind, silly voice, observing ‘self’ to name a few.

Learning objectives:

- 1.) Participants will learn one of the core processes of ACT to increase psychological flexibility.
- 2.) Participants can facilitate clients to being in the present moment (one of the core ACT processes) as it allows other processes to occur.
- 3.) Learn an important concept in the treatment of OCD and other anxiety disorders.
- 4.) Learn advanced skills which go beyond cognitive restructuring of traditional CBT.
- 5.) Participants will experience an overall sense of wellbeing for themselves.

Readings:

- Harris, R. (2009). ACT made simple. Oakland, CA: New Harbinger Publications, Inc.
- Acceptance and Commitment Therapy, Second Edition: The Process and Practice of Mindful Change
- Acceptance and Commitment Therapy For Dummies
- The ACT Approach: A Comprehensive Guide for Acceptance and Commitment Therapy
- ACT in Steps: A Transdiagnostic Manual for Learning Acceptance and Commitment Therapy
- Harris, R. (2018). ACT questions and answers: A practitioner's guide to 150 common sticking points in Acceptance and Commitment Therapy. Context Press.
- Hayes, S. C., & Smith, S. (2005). Get out of your mind and into your life: The new Acceptance and Commitment Therapy. New Harbinger Publications, Inc.

SC/7: CBT for Procrastination

Skill Class Master: Dr. Shishir Palsapure

Contact: shishirpal@gmail.com

Country: India

The skill class is aimed at equipping therapists to help their clients overcome procrastination.

Topics covered:

1. Procrastination and strategic delay
2. Styles of procrastination
3. Permission giving beliefs
4. Assessment: ADHD
5. Cognitive behavioural Techniques to manage procrastination: (e.g. Behavioural activation, TIC TOC. For a variety of styles of procrastination), Worksheets.

Therapists will be able to apply the skills to themselves, as well as their clients.

SC/8: A Positive CBT based Intervention with primary caregivers of patients suffering with mental illness.

Skill Class Master: Dr. Rati Khurana

Contact: khurana.rati29@gmail.com

Country: India

Abstract: Who the skill class is aimed at: The skill class would be aimed at building an understanding of how to work on a cognitive and emotion level while incorporating techniques from Positive CBT with the primary caregivers of patients suffering with mental illness. The intervention would be helpful in reducing distress, anxiety and depressive symptoms, increasing resilience and positive aspects of caregiving.

Scientific Background: There is a rising incidence of mental illness and socio-demographic transitions all over the world, particularly in developing countries. While mental illness brings with its enormous psycho-social sequelae for the patient, it is also associated with significant stress and burden for the caregivers- familial or professional. Although, it is a challenging task to be a caregiver to a person suffering from a severe mental illness, it is a crucial support and service for the patient who is suffering from the mental disorder and serves to motivate them to get better.

The caregivers often push their limits in the task of giving care but might not always feel as strong and might not be able to even vent out their feelings of how they exactly feel. As caregiving is considered a very noble thing to do, their innate feelings and distress might not be acknowledged and taken care of. Therefore, while caring for their loved ones, carers sometimes may take for granted their own quality of life and emotional health. However, this issue should be taken seriously and considered as an urgent priority.

For too long, mental health practitioners have focused on symptom reduction as a suitable option for mental well-being. Positivity has been considered as a by-product of symptom reduction while recovery in psychiatry does not include the restoration of positive functioning in clients. Reflecting on certain concerns that caregivers must be facing, a solution focused approach towards problem could be the answer instead of simply reduction of symptoms. Developing suitable interventions that focus on well-being and what works for them is the need of the hour.

Key Learning Objectives:

- Conducting a solution focused intervention catering to the individual needs of primary caregivers.
- Coaching individuals to use effective Positive CBT techniques for case conceptualisation, case formulation and therapy to help caregivers recognise their strengths and divert attention from what is not working to what already is.
- Effectively addressing the concerns of caregivers while working with them towards a solution focused paradigm that would help them find benefit out of their role as a caregiver.
- Understanding the importance of positive psychology exercises like benefit finding, recognising three blessings and exceptional moments, finding reasons to be grateful for and recognising one's best self.
- To help therapists design their sessions around building on caregiver's resilience and well-being as a therapy outcome.
- Coaching therapists to help caregivers develop a skill set for a desired future along with lowering their symptoms.

Teaching Methods: The skill class would be an interactive learning session that would comprise of some activity as well as practical based learning along with an informative session. It would ideally consist of 2 role plays to better understand the application of the intervention with the caregivers.

Background Readings:

- 1.) Khurana, R. & Kumar, N. (2021). A positive Cognitive Behaviour Therapy based Intervention with a caregiver of a patient with mental illness amidst the Covid-19 pandemic: A case study. *International Journal of Current Research and Review*, Vol. 13 (12), 239-242.
- 2.) Geschwind, N., Arntz, A., Bannink, F., & Peeters, F. (2019). Positive cognitive behavior therapy in the treatment of depression: A randomized order within-subject comparison with traditional cognitive behavior therapy. *Behaviour research and therapy*, 116, 119–130. <https://doi.org/10.1016/j.brat.2019.03.005>
- 3.) Bannink, F. P. (2013). Are you ready for positive cognitive behavioral therapy. *The Journal of Happiness & Well-Being*, 1(2), 61-69.

SC/9: CBT with Cognitive training for children & adolescents with ADHD

Skill Class Master: Dr Susmita Halder

Contact: sushmitahalder@gmail.com

Country: India

Abstract: Background: For children and adolescents with ADHD, the learning objectives of Cognitive Behavioural Therapy (CBT) with cognitive training include developing adaptive coping mechanisms, boosting goal-oriented behaviour, and strengthening impulse control and self-regulation abilities. In addition, the therapy seeks to improve problem-solving abilities, strengthen self-esteem, and address distorted thought patterns. CBT with cognitive training aims to assist people with ADHD in gaining efficient time management skills, effective organising abilities, and a positive outlook through targeted interventions and structured exercises. The main objective is to enable them to overcome obstacles in their daily lives, develop resilience, and enhance their general cognitive and emotional abilities.

Key learning objectives of skill class: In this skill class, focus will be

- ✓ understanding the CBT principles, the underlying neurobiology
- ✓ plan the therapeutic techniques, and its efficacy for children and adolescents with ADHD
- ✓ to gain hands-on experience in the process of the planning and implementation of therapy
- ✓ improve therapeutic outcomes on the patients.

Whom the workshop is aimed at:

- Practicing psychologists, Clinical psychologists
- CBT practitioners
- Students, Research sc

Background Readings:

1. Rivera Flores, G. W. y Barreda Parra, V. A. (2014). Cognitive Behavioral Treatment in Children with Attention Deficit Hyperactivity Disorder. *Revista de Psicología Universidad de Antioquia*, 6(2), pp.79-94.
 2. Halder S, Mahato AK. Neurocognitive psychotherapy for adult attention deficit hyperactive disorder. *Ind Psychiatry J* 2009;18:113-6
 3. Haugan, A. L. J., Sund, A. M., Young, S., Thomsen, P. H., Lydersen, S., & Nøvik, T. S. (2022). Cognitive behavioural group therapy as addition to psychoeducation and pharmacological treatment for adolescents with ADHD symptoms and related impairments: a randomised controlled trial. *BMC psychiatry*, 22(1), 375.
 4. Knouse, Laura E. "Cognitive-Behavioral Therapies for ADHD." In *Attention-Deficit Hyperactivity Disorder: A Handbook for Diagnosis and Treatment*, edited by Russell A. Barkley, 757-73. 4th ed. New York: Guilford Press, 2014.
-

SC/10: Training in Cognitive Therapy Rating Scale- Revised (Ctrs-R)

Skill Class Master: Dr. Swati Karve

Country: India and USA

Abstract: Rationale: As CBT practitioners it is important to develop therapeutic skills in general and CBT skills in particular to ensure positive client outcomes. Cognitive Therapy Rating Scale (CTRS) is an important tool that was developed at the Beck Institute to help practitioners to help assess competencies of practitioners. This scale was revised and a new instrument was created that had more validity across the competencies. This session covers the competencies of CTRS-Revised along with its dimensions and assessments. The intricacies of the tool will be discussed in the session.

Method: The session is interactive. Along with Instructor Led Presentation demonstration of different techniques will be used to illustrate the CBT competencies. A case history of a hypothetical client will be used as reference. Short role plays would be used to demonstrate skills.

Duration: 120 minutes

Learning Objectives:

By attending this session participants will be able to:

1. Describe each CTRS-R competency and explain its dimensions
2. Rate themselves on each dimension of the scale
3. Rate supervisees or students on the CTS-R competencies (if relevant)
4. Create action plans to develop their own competencies in CBT practice
5. Ensure positive outcomes for the clients and their caregivers by developing their competencies

Eligibility Criteria: Mental Health Practitioners with at least one year experience in CBT Practice

Reference: Beck Institute | Cognitive Therapy Rating Scale – Revised (CTRS-R) - Beck Institute



ACBTA 2024 NEW DELHI SCIENTIFIC PROGRAM

INVITED SYMPOSIA



INVITED SYMPOSIA

IS/1: Using Digital Tools to Optimise Exposure-Focused CBT for Children with Anxiety Disorders

Authors: Jennie Hudson

Country: Australia

Abstract: The first-line treatment for paediatric anxiety disorders, Cognitive-Behavioural Therapy (CBT), typically integrates anxiety management strategies such as cognitive restructuring and relaxation, followed by exposure. Exposure is believed to be successful because it establishes new memories about the feared situation that compete with existing ‘anxious’ memories. However, its limited implementation in practice due to concerns about inducing child distress has often led to the prioritization of other non-evidence-based strategies over exposure techniques.

The “Courage Quest” program, a novel parent-led digital intervention designed for children aged 8 to 12 with anxiety disorders, addresses this gap. Developed in collaboration with children experiencing anxiety and their parents, this innovative digital tool aims to increase access to exposure-focused therapies. Under parental guidance, children gain insights into anxiety and apply newly acquired skills to confront their fears using the principles of exposure-focused CBT.

Methods: The program is currently undergoing evaluation in two trials. The first is a pilot trial involving 7 child-parent dyads dealing with clinical anxiety. The second trial employs a factorial treatment design to determine the optimal delivery of exposure techniques. Outcome measures encompass child- and/or parent-reported anxiety levels.

Results: The outcomes of these trials are anticipated to provide preliminary evidence regarding the feasibility, acceptability, efficacy, and optimization of exposure-focused CBT through a parent-led digital format for children.

Conclusion: Empowering parents and clinicians to deliver exposure-focused CBT through the innovative digital platform “Courage Quest” holds the potential to reduce anxiety symptoms and increase remission rates in children with anxiety disorders.

Digital interventions offer immediate access to treatment delivered with consistently high fidelity, promising enhanced support for the use of exposure in the treatment of anxiety disorders in children.

IS/2: Exploring optimal components of internet-based CBT for sub-threshold depression

Authors: Masatsugu Sakata

Country: Japan

Abstract: Subthreshold depression is a significant risk factor for the onset of major depression and causes significant dysfunction (Lee et al., 2019). However, people with subthreshold depression does not often seek professional help compared to those with severe depression. Internet-delivered cognitive behavioral therapy (iCBT) has the potential to reach and deliver care for this population. Current IPD-MA showed iCBT promise for subthreshold depression (Reins et al., 2021). However, the effective components for this population are still unclear. In

developing iCBT for subthreshold depression populations who do not want to spend time on a typical CBT package, intervention should be efficient and simple, combining only effective components.

Optimal iCBT components and combinations have been investigated using the factorial trial. The Healthy Campus Trial (HCT) investigated the effects of the presence or absence of five iCBT components (self-monitoring, behavioural activation, cognitive restructuring, assertiveness training, and problem-solving) for 1093 university students with subthreshold depression (Sakata et al., 2022). As a result, all groups improved depression severity during the 8-week intervention duration, and no significant difference was found between the presence and absence of each component. However, several implications were learned from this trial for future iCBT optimization trials.

Considering the results of the HCT, a sophisticated 2-by-2 factorial trial design was made, and now a new trial is being conducted for population-based factorial trial for the general adult population (Resilience Enhancement with Smartphone in Living Environments: Resilient trial; Furukawa et al., 2023). The trial has the potential to prove an optimal and individualized iCBT format for improving the population burden of subthreshold depression.

IS/3: Improving Mental Health with Tailored CBT App: The Mindbooster App Project

Authors: Kyong-Mee Chung

Country: Korea

Abstract: Over the past decade, Cognitive Behavioral Therapy (CBT) programs implemented in mobile form have been repeatedly validated for their effectiveness in treating various mental disorders. However, in order to observe the therapeutic effects of CBT, users need to consistently utilize the program for an extended period, yet particularly in clinical settings, high dropout rates are reported. In this talk, a Mindbooster program, a CBT program tailored to the age and occupation of the subjects as a means to promote independent and sustained use, will be introduced. This presentation introduces four studies which tested the effectiveness and user experiences of a few versions of Mindbooster programs, followed by proposing various strategies to enhance the independent and sustained use of CBT apps.

IS/4: Training and Supervision of CBT Practitioners in Asian Countries

Authors: Dr. Allen Miller

Country: Malaysia

Training and supervision are different activities from therapy and they require a different knowledge base and skill set. One myth is that all good therapists make good trainers and supervisors. During his presentation, Dr. Miller will report on lessons learned from his career as a trainer and supervisor, and the experiences of Beck Institute, a leading CBT training organization.

Issues to be considered in the training and supervision arena are myths about CBT, what we want trainees to learn and methods we utilize to teach CBT. The Beck Model of CBT teaches trainees about the significance of therapeutic relationships, cognitive conceptualizations, how

to evaluate beliefs, apply evidence-based techniques, and structure therapy sessions. Dr. Miller will highlight the importance and interrelatedness of each to the other.

The quality of treatment provided by trainees is influenced by their own training and beliefs about doing therapy. Sadly, some motivated therapists do not have access to good quality training and therefore, get off on the wrong foot when doing therapy. Sometimes therapists' beliefs about what is effective treatment change and they take shortcuts or skip crucial elements of the therapy process. Trainers and supervisors need to pick up with trainees at whatever their stage of training, beliefs, and practice may be.

Dr. Miller will share his experiences from working with Asian therapists who consider supervisory relationships, therapeutic relationships, the effects of myths, barriers to training and supervision, and effective methods for providing training and supervision.

IS/5: Training and Supervision of Cognitive Behavioral Therapy in Japan: A Decade of Challenges

Authors: Yasue Mitamura, Hitomi Oi, Ikue Umamoto, Yutaka Ono, Hironori Kuga

Country: Japan

Abstract: Cognitive behavioral therapy (CBT) has been proven effective in treating various mental disorders, but its dissemination and implementation have been challenges due to a lack of therapists. The National Health Service developed the Improving Access to Psychological Therapies (IAPT) program to provide more psychotherapy in the United Kingdom. This initiative not only improved accessibility and therapeutic effects but also demonstrated economic benefits (Wakefield et al., 2020; Clark et al., 2018). In Japan, opportunities to learn CBT are limited. Traditionally, individuals had to study under a therapist who was familiar with CBT or take training courses in self-improvement to learn CBT. Addressing this issue, in 2010, the Ministry of Health, Labor and Welfare (MHLW) launched a CBT training initiative as part of its anti-suicide measures, making it possible for participants to receive training and supervision free of charge. In the project, participants attend 2-day CBT training which allows them to conduct CBT at their own workplaces with supervision. Until FY2022, a total of 1,807 participants had taken the 2-day training course, of whom 541 had completed supervision. A questionnaire survey was administered to participants before and after the 2-day training course in the project, and 189 of the participants who attended the course in FY2023 responded to the survey. Participants were primarily physicians, certified public psychologists, and nurses, with percentages of 39%, 39%, and 17%, respectively.

This presentation will report the current states and issues of the CBT training system in Japan, including the survey results. Furthermore, the discussion will extend to prospects of the CBT training and supervision with a view toward enhancing its dissemination and implementation within the broader Asian context.

IS/6: Enriching CBT by Neuroscience: Cross-cultural perspectives

Chair: Prof Ashima Nehra

Co- Chair: Dr Susmita Halder

Authors: Dr. M. Mahmudur Rahman, Prof Tomohiro Nakao, Dr. Navkiran Kalsi

Countries: Bangladesh, Japan and India

Presentation 1: Blending neuroscience and CBT in mental health Assessment Formulation and Treatment: Dr. M. Mahmudur Rahman, Dept. of Clinical Psychology, University of Dhaka, Bangladesh

Abstract: Psychology is based on contradictory theories! Based on common senses! everyone can work with psychological issues! Or psychology is based on the very complex and dynamic science where brain and sociocultural phenomena are always interacting with each other to determine behaviour in everyday life and to develop psychopathology. In 1957 Cronbach in his presidential lecture of APA mentioned the importance of neuroscience-based psychology in promoting etiologic-mechanism-based mental health practice. 67 years gone, and still multiple theories, multiple assessment formulations and treatment strategies!! No therapy claims that it is not efficient. So, how does psychopathology develop and how does psychotherapy work? A lot of debate. CBT is widely effective and promising but still, there are significant gaps regarding the endophenotype perspective which could be addressed by incorporating neuroscience in the assessment, case conceptualization and treatment. Based on empirical experiences those issues will be presented in this paper.

Presentation 2: Treatment strategy for obsessive-compulsive disorder based on recent neuroimaging findings: Tomohiro Nakao, Department of Neuropsychiatry, Graduate School of Medical Sciences, Kyushu University

Abstract: Obsessive-compulsive disorder (OCD) was previously considered refractory to most types of therapeutic intervention. There is now, however, ample evidence that selective serotonin reuptake inhibitors (SSRIs) and cognitive behavior therapy (CBT) are highly effective for treatment of OCD. Furthermore, recent neurobiological studies of OCD have found close relationship between clinical symptom and brain function. A large number of previous neuroimaging studies using PET, SPECT or fMRI have identified abnormally high activities throughout the frontal cortex and subcortical structures in OCD. Most studies reported excessive activation of areas including the orbitofrontal cortex (OFC), thalamus, caudate nucleus and anterior cingulate cortex (ACC) during provocation of obsessive-compulsive symptoms. These hyperactivities were decreased after successful treatment using either SSRIs or CBT. From these findings, the orbitofrontal-striatal circuit has been postulated as a neural circuit that mediates the symptomatic expression of OCD. Findings from recent studies, however, have been inconsistent, suggesting that extending large-scale brain systems not limited to the orbitofrontal-striatal circuit may be involved in the pathophysiology of OCD. One of the reasons for this inconsistency could be attributed to heterogeneity in OCD. Several studies have conducted correlative analyses to clarify distinct neural correlates associated with specific symptom dimensions. Other researchers have attempted to reveal the relationship between differential brain activities of OCD and comorbid disorders such as major depression and tic disorders. This presentation gives an outline of recent neuroimaging studies of OCD. We, furthermore, will show a treatment strategy for OCD, based on these neuroimaging findings. neurobiological model that has been developed recently. Advanced findings in these

fields will modernize the biological model of OCD and give us helpful hints to work out a novel treatment strategy.

Presentation 3: Harnessing the power of Virtual Reality for improved mental health: Dr. Navkiran Kalsi, Assistant Professor, Faculty of Behavioural Sciences, SGT University, Gurugram

Abstract: Virtual Reality (VR) is a technology that creates a computer-generated environment or simulation that enables users to interact with a three-dimensional environment that mimics the real world. VR typically involves the use of a head-mounted display (HMD) that cover the user's field of vision and can also incorporate other sensory inputs, such as sound, haptic feedback (sensations of touch), and even motion tracking, to enhance the feeling of presence within the virtual environment. The presentation seeks to provide an insightful overview of the innovative applications of VR technology as a therapeutic tool transforming the field of mental health and wellbeing. Through thoughtful and conscious utilization, VR offers an engaging and cost-effective means of addressing various mental health challenges like stress, pain alleviation, phobias, PTSD, depression. Therapists around the globe can incorporate VR-aided therapies in their clinical practice. VR has proven to have promising results in non-clinical settings, including mindfulness and meditation, self-reflection, and empathy-building.

However, as encouraging as the growing body of research and clinical evidence is, VR still faces barriers to widespread implementation. The presentation will address the ethical considerations and potential limitations associated with the use of VR in mental health treatment. By examining both the promise and the challenges of VR in this context, this talk aims to inform researchers, clinicians, and policymakers about the evolving landscape of mental health interventions, with VR at the forefront of this innovative frontier.

IS/7: CBT Policy and its Development in Japan

Author: Hironori Kuga

Country: Japan

Abstract: In Japan, the number of suicides has exceeded 30,000 per year for 14 consecutive years from 1998 until 2011, and remains one of the most serious social problems. The suicide rate in Japan is extremely high even by international standards, with recent data showing that the male suicide rate is the third highest among OECD member countries and the female suicide rate is the second highest. To address this situation, the Japanese government, as well as local and private organizations, have taken several steps to prevent suicide. First, in 2006, the Basic Law on Suicide Prevention was enacted, outlining the basic framework for suicide prevention, and since then, a full-fledged national suicide prevention program has been implemented. In addition, academic research on suicide is accumulating better results, mainly in the fields of psychiatry, epidemiology, and psychology. Cognitive behavioral therapy (CBT) is an extremely effective treatment for psychiatric disorders such as depression, which is often cited as a direct cause of suicide, and in 2010, CBT for depression was reimbursed by the Japanese government. At the same time, the first centre for Cognitive Behavior Therapy and Research, which specializes in training and development of CBT, was established within the National Center of

Neurology and Psychiatry in Japan. The Ministry of Health, Labour and Welfare (MHLW) initiated the CBT Training Program, and our CBT centre has played a central role in training personnel for the program. To date, more than 6,000 medical providers have participated in the two-day workshop on CBT for depression. In addition to depression, the CBT of obsessive-compulsive disorder, social anxiety disorder, panic disorder, and post-traumatic stress disorder was introduced in 2016 and was reimbursed in 2018. However, according to a survey conducted by the MHLW, there are regional disparities in the dissemination of CBT, and it is difficult to say that it has been sufficiently widely used in Japan. On this day, I would like to present the policy transition and current status of cognitive-behavioural therapy in Japan.

IS/8: Beyond Covid-19 – lessons in preparedness – implications for CBT

Author: Naoki Takamatsu

Country: Japan

Abstract: The COVID-19 pandemic had a profound impact on mental health, driven by the complex interactions of psychosocial and socioeconomic factors. In correlation with the rapid spread of COVID-19, the annual suicide rate in Japan increased in 2020, breaking an 11-year streak of decline. While a reduction in acute-phase turmoil has been attained, there is a substantial number of global post COVID-19 condition (PCC) patients, estimated at over 65 million, whose experiences, impact on daily life, and optimal interventions remain unclear.

To address this issue, we conducted the Psychiatric Symptoms for COVID-19 Registry Japan (PSCORE-J), the first national research in Japan focusing on the neuropsychiatric symptoms of PCC. The study enrolled adults aged 16 and above who contracted COVID-19, collecting biopsychosocial data, including information on depression, anxiety, insomnia, and quality of life, alongside blood samples and MRI scans.

Important findings from our interim analysis have been revealed. Approximately one-fourth of individuals who contracted COVID-19 displayed severe depression with over half experiencing suicidal ideation based on evaluation by PHQ-9. Key predictors for suicidal ideation among working-age individuals included retirement experiences, communication issues within families, and the presence of symptoms such as depression, anxiety, and concentration difficulties. Moreover, our study extended the understanding of PCC by identifying factors that forecast changes in daily life. A mixed-methods approach was employed, combining questionnaire surveys and semi-structured interviews to analyze core themes related to the impact of PCC. Results highlighted uncertainties concerning the illness's prognosis and the issue of insufficient understanding by others.

These findings hold significant implications for identifying specific target populations and developing effective treatments for PCC. We ultimately aim to establish a cognitive-behavior model for PCC and contribute to therapeutic development. In this symposium, we will focus on this process and its results, sharing our current insights and discussing future prospects.

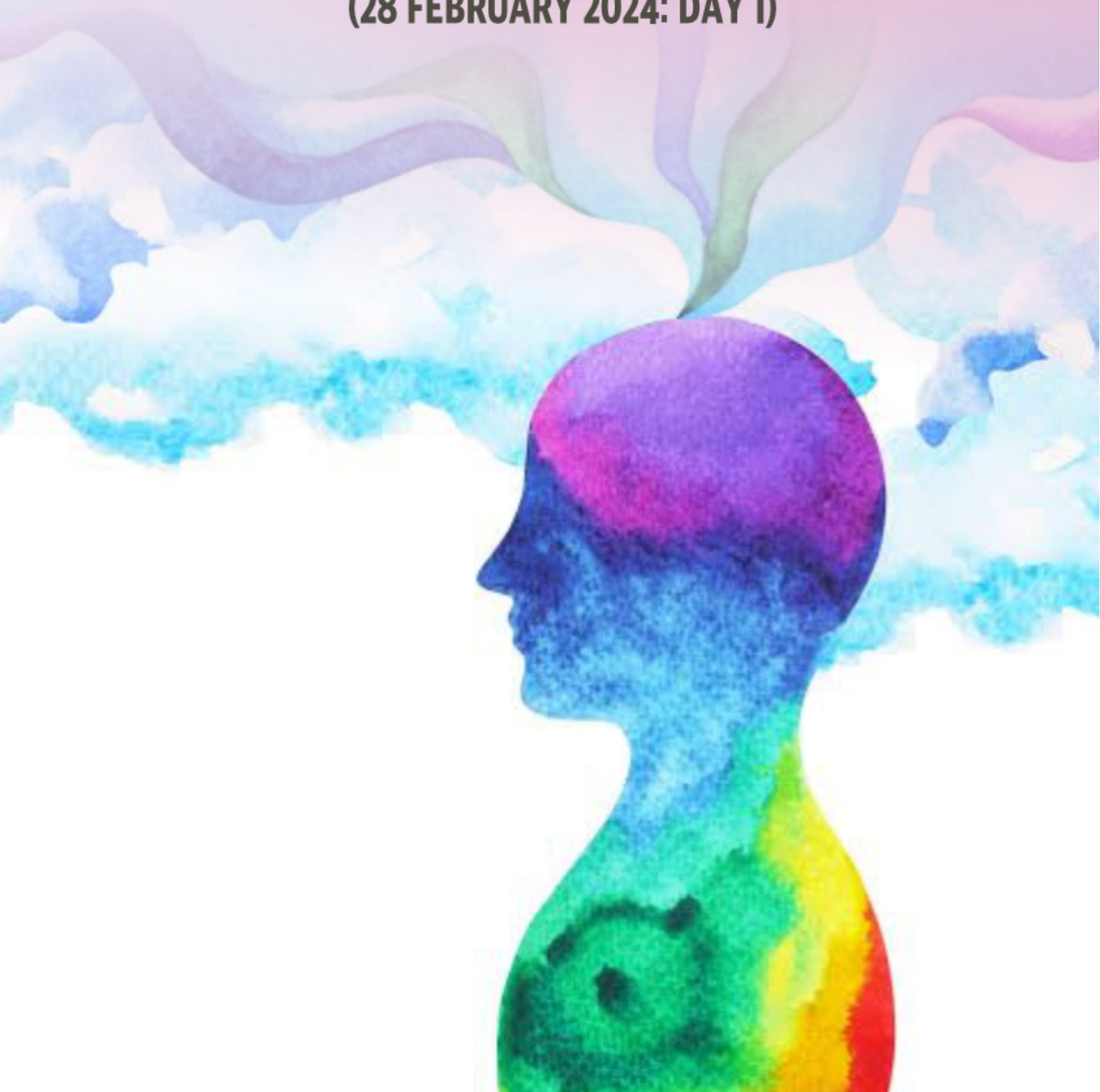


ACBTA 2024 NEW DELHI SCIENTIFIC PROGRAM

TRACK 1

CBT FOR PSYCHOLOGICAL TRAUMATIC LIFE EVENTS

(28 FEBRUARY 2024: DAY 1)



TRACK 1
CBT FOR PSYCHOLOGICAL TRAUMATIC LIFE EVENTS
(28TH FEBRUARY 2024: DAY 1)

OPEN SYMPOSIA

1.10: Trauma-informed interventions

11/T1.10/S/3: Understanding Diverse Psychopathology through Trauma Lens

Authors: Sampurna chakraborty, Susmita Halder, Ritwika Nag, Sneha Das, Sheeba Shamsudeen

Contact: sampurnachakraborty92@gmail.com

Country: India

Abstract: Here we aim to explore the pervasive impact of trauma across various diagnostic categories and propose a trauma-centric perspective on psychopathology. We will emphasize how early life trauma, complex trauma, and attachment trauma can elicit a range of trauma reactions, encompassing emotional, cognitive, physiological, and behavioral symptoms. These trauma reactions may manifest as emotional responses such as anger, guilt, self-blame, helplessness, apprehension, as well as behavioral tendencies including aggression, frequent mood swings, and engagement in high-risk behaviors. Cognitive challenges like difficulty concentrating, memory problems, hindered problem-solving and decision-making, and physiological symptoms such as hyperarousal, sleep disturbances, erratic eating patterns, unexplained somatic complaints, as well as social and interpersonal consequences, including avoidance, social withdrawal, and disrupted relationships, are also common trauma reactions. These diverse trauma reactions can render individuals more susceptible to heightened levels of anxiety and depression. Additionally, they may contribute to a more volatile sense of self, inadequate coping mechanisms, and difficulties adapting to their environment, ultimately leading to severely disrupted interpersonal relationships. Our goal is to underscore the connection between various forms of psychopathology and underlying trauma experiences. Neglecting a person's trauma history can lead to the assignment of multiple diagnostic labels, which may not necessarily translate into effective treatment outcomes. We will illustrate how trauma can underlie symptoms of anxiety or depression and how attachment trauma can have enduring effects on an individual's personality. Moreover, we will demonstrate that different diagnoses, such as panic disorder, OCD, recurrent depressive disorder, eating disorder, EUPD, and dissociative disorders, can all be comprehended through a trauma-focused lens. Our approach involves incorporating this trauma-informed perspective into the treatment planning process, tailoring interventions to the individual's unique needs, rather than simply selecting evidence-based treatments based solely on a diagnosis.

Keywords: Trauma, Psychopathology, Anxiety, Depression, Personality Disorders, Trauma-informed lens

2.14: CBT for suicide and Postvention services

127/T2.14/S/15: Beyond Grief: Designing Cognitive Behaviour Therapy Interventions for Suicide Loss Survivors

Authors: Dr. Chittaranjan Behera

Contact: drchitta75@rediffmail.com

Country: India

Abstract: Designing Cognitive Behaviour Therapy (CBT) for suicide loss survivors demands a focused approach due to the complex nature of their grief. Suicide loss survivors wrestle with difficult emotions, including guilt and self-blame, often deepened by social stigma and isolation. Effective CBT interventions must provide a safe space to express these feelings, challenge negative thought patterns, and address the trauma associated with suicide loss. Assisting survivors with a diverse array of coping strategies is important in the healing journey following the traumatic loss from suicide. Providing them with effective tools to navigate the complex web of emotions, including guilt, anger, and distress, nurtures resilience. Timely and targeted interventions, designed to meet the unique needs of each survivor, can not only help in dealing with immediate grief but can also serve as a foundation for long-term psychological well-being. By combining coping strategies, supportive networks, and timely therapeutic guidance, tailored CBT interventions can offer essential support, fostering healing and resilience among suicide loss survivors and gradually finding a path towards healing and recovery.

Keywords: Suicide Loss Survivors, Traumatic Loss, Cognitive Behavioral Therapy, Grief Counselling, Coping Strategies, Psychological Well-being

1.7: Transdiagnostic CBT for PTSD in adolescents and adults

67/T1.7/S/7: PTSD, Depression, Anxiety & Self-harm in Adolescents in Living in Identified Crime Zones: An Outline of a School-based Trans-diagnostic CBT Intervention Module for Adolescents

Authors: Dr. Renu Sharma, Dr. Silky Arora, Dr. Neeraj, Dr. Sujata Satapathy

Contact: silkyb.arora@gmail.com

Country: India

Abstract: Overview and Vulnerability: The first mental disorder (MD) occurs before 14 years in 1/3rd and before 18 years in almost half of cases. The peak/median age of onset across all MDs is 14.5 years. The National Mental Health Survey (NMHS), 2016 reported that the prevalence of MDs is 7.3% among children aged 13–17 years in India, other studies reported these between 12-33%. Indian data on prevalence of either PTSD or co-morbid common MDs (CMDs) among adolescents is non-existent although co-occurring of CMDs and PTSD is common and display more complex and disabling symptoms.

Improper child development and contextual risk factors including low socioeconomic level, family conflicts, traumatic life events, and neighbourhood crime/community violence are the key determinants. Diverse stressors, emotional immaturity, inexperience, poor resilience and inadequate coping strategies are also crucial. Repeated exposure to potential/actual violence

may further elevate the gravity of impacts. The positive relationship between neighbourhood crimes/violence and internalizing/externalizing mental health symptoms in adolescents is established. And regular school mental health service does not focus and is not equipped to identify and address such mental health issues, hence causing development of CMDs in early adulthood. Different degrees of proximity to neighborhood crimes/community violence and other trauma influence such mental health issues differently.

Prevalence: Case of Delhi Crime Zone Study. Adverse Childhood Experiences (ACEs) are potentially occurring traumatic events at home, community or any other significant venue. Experiencing or witnessing ACEs during the age of 1-18 years have significant risk of mental illnesses or chronic health issues in adolescents (Boulter and Blair, 2018). Verbal/Physical/Sexual abuse, living with a parent with substance/alcohol, Serious fight / altercations in parents/family, natural disasters and many other home-bound / natural calamity based potential traumatic events are studied worldwide, however crime in the neighbourhoods, a neglected context, is a potential risk factor for development of trauma and internalising disorders such as PTSD and depression in adolescents (Milauskas et al, 2022). Based on multi-stage cluster sampling model, 927 adolescents (Mean Age=14.85years, 52.63% females) from randomly selected government schools located in low, moderate and high crime zones in Delhi constituted the sample. Self-reporting questionnaires for the assessment of PTSD, depression and/or anxiety, adverse childhood experiences, sociodemographic and modified adverse childhood experiences (ACE) were applied. 873 adolescents completed all assessments. Experiencing or witnessing serious accidents or injuries to self were the highest reported trauma by adolescents, followed by stressful/frightening medical procedure, serious fights or altercations between parents or family members, witnessing murder or injury due to crime and community violence. 20.04% (n=175) adolescents out of total sample had attained cut off scores (CPSS \geq 31 and PC PTSD \geq 4) and a probable PTSD diagnosis. 54.98% for PTSD (CPSS $>$ 10), 32.41% in depression (PHQ $>$ 10), 41.35% for anxiety (GAD $>$ 4) were the overall prevalences for all severity levels in adolescents. PTSD comorbidity of depression and anxiety was also present significantly. The adolescents with subclinical cut offs (n=305) are prone to develop full-fledged clinical PTSD.

Keywords: PTSD, depression, anxiety, crime, Trans-diagnostic CBT, School

1.14: New courses in trauma psychology

80/T1.14/S/10: Using CBCT for treating trauma experienced in relationships: an Individual and conjoined therapy

Authors: Dr. Chinu Agrawal, Tanu Choksi, Shweta Puri

Contact: feelingmindsindia@gmail.com

Country: India

Abstract: Presenter 1 - Introduction: Dr Chinu Agrawal, Ph.D: Relationship trauma can have a profound effect on couples' emotional intimacy and connection, providing considerable issues in continuing a healthy and fulfilling intimate life. CBCT provides a methodical and collaborative approach to recognising, analyzing, and resolving relationship trauma. Examining the core principles of CBCT as a conjoint therapy, this discussion highlights the therapeutic approach's primary emphasis on incorporating both partners. The intervention

provides a safe environment for couples to address how trauma has affected their relationship dynamics by encouraging open communication, empathy, and working together to resolve issues.

Within this framework, cognitive restructuring therapy (CBCT) combines behavioral interventions, interactive activities, and cognitive restructuring strategies to empower couples with practical abilities for effectively managing issues associated with trauma. Further, explores how CBCT can be tailored to address different types of relationship trauma, such as emotional abuse, betrayal, and infidelity. Case studies and factual information are applied to demonstrate how effective Cognitive Behavioural Therapy (CBCT) is in helping traumatized couples heal, regain trust, and improve their ability to interact with one another.

Presenter 2 – Individual trauma and Relationships: Tanu Choksi: Trauma, with its multifaceted implications, often strains the dynamics of romantic partnerships. This discussion explores the intricate and profound impact of individual trauma on interpersonal relationships, elucidating how it can lead to distress in various forms. Individual trauma can cause a breakdown in communication, as survivors may struggle to express their emotions and experiences effectively. Additionally, it can erode trust, creating barriers within the relationship. This discussion delves into these intricacies and emphasizes the practical application of Cognitive-Behavioral Couple Therapy (CBCT) as a means of intervention. A case conceptualization is presented, illustrating how CBCT can be used to tackle challenges arising from trauma within a romantic relationship.

The discussion outlines a comprehensive treatment plan that encompasses specific strategies, interventions, and objectives, all designed to facilitate healing and enhance the well-being of the couples involved. By adopting a trauma-informed perspective and integrating it with CBCT, therapists can effectively facilitate the healing process for individuals and couples impacted by trauma. The overarching objective is to foster healthier, more fulfilling relationships that can withstand the challenges posed by personal trauma

Presenter 3 – Interpersonal trauma within the context of relationships: Shweta Puri: This discussion focuses on investigating interpersonal trauma within the context of relationships. Interpersonal trauma refers to experiences of physical, emotional, or sexual abuse inflicted by others, specifically within the context of relationships, such as intimate partnerships, familial bonds, or friendships. Trauma, betrayal, substance use, and physical abuse can all significantly impact a couple's relationship dynamics and individuals' mental health.

When a partner experiences abuse in the context of relationships it predisposes them to depression and cognitive bias for self, others and life, hence impacting the quality of their relations. A systematic review of the literature highlighted that CBCT shows promise to reduce symptoms of depression and PTSD, while also effectively improving relationship quality.

Keywords: CBCT, trauma - individual & trauma - in the context of relationship

1.15: Others

151/T1.15/S/18: Cognitive behavioral perspectives in service deployment for forcibly displaced communities in humanitarian crisis

Authors: Muhammad Kamruzzaman Mozumder

Contact: mozumder@du.ac.bd

Country: Bangladesh

Abstract: The humanitarian crisis, especially when it is protracted, is known to create severe psychological scars in the individuals going through such experiences. While at the beginning of the crisis, psychological support needs are mostly handled by psychological first aid, the later stages of crisis call for intensive psychological therapies. Which is often difficult to ensure due to, i) the huge number of people in need, ii) the lack of skilled professionals, and iii) the resource- and time-intensive nature of training professionals. Developing and adopting CBT-based intervention can be extremely useful in such contexts. In this symposium, four presenters will discuss the scope and utility of CBT in this context.

The first paper will present the unique aspects of the protracted humanitarian crisis of the forcibly displaced Myanmar nationals in Bangladesh. The second paper will discuss the prospect of CBT-based interventions considering the mental health needs of this refugee community. The third paper will present the needs and concerns of the service providers and how CBT can be suitable in helping them with the understanding and skills needed for their service delivery. The fourth and final paper will discuss experiential insights into integrating CBT ethics in designing and implementing a supervision system for mental health service providers working in a humanitarian crisis context.

The insights from the symposium may be useful for the professionals, program planners and policymakers working in humanitarian crisis contexts across the globe.

List of papers in the symposium (presenting author marked with *):

1. Psychosocial support in humanitarian crisis: The case of forcibly displaced Myanmar nationals in Bangladesh: Muhammad Kamruzzaman Mozumder*, Ruth Wells, Ceren Acarturk, Saidul Islam
2. Mental health needs in the displaced community: Prospects for CBT interventions: Fowzia Kabir Chowdhury Lamia*, Sabiha Jahan, Md. Omar Faruk, Sowmic Tabassum Kotha, Fatema Syeda Alam, Tahmina Sarker Prokrity, Ruth Wells, Gülşah Kurt, Muhammad Kamruzzaman Mozumder
3. Providers need and the scope of CBT strategies for supervision of mental health and psychosocial support providers in the humanitarian crisis context in Bangladesh: Sowmic Tabassum Kotha*, Sabiha Jahan, Fatema Syeda Alam, Tahmina Sarker Prokrity, Fowzia Kabir Chowdhury Lamia, Ruth Wells, Gülşah Kurt
4. Integrating community voices into clinical supervision: Embracing CBT ethics into program development: Sabiha Jahan*, Shaun Nemorin, Ariel Zarate, Md. Omar Faruk, Muhammad Kamruzzaman Mozumder, Simon Rosenbaum, Gulsah Kurt, Ruth Wells

Keywords: Refugee, Humanitarian crisis, Displaced community, Supervision,

1.11: Traumatic life events, women, and mental illnesses

209/T1.11/S/24: Understanding Borderline Personality Vulnerabilities through a Trauma-informed Lens: Implications for Conceptual Frameworks, Assessment and Treatment

Authors: Poornima Bhola, Dr. K. Dharani Devi, Dr. Kanika Mehrotra

Contact: poornimabhola@gmail.com

Country: India

Abstract: In this symposium, we draw from our empirical research and collective experiences as therapists and supervisors to discuss the intersections of complex trauma and borderline personality presentations. We specifically attend to the role of mentalization, or the ability to consider oneself and others in terms of mental states, as a lens through which these distinct but deeply connected phenomena can be better understood.

Dr. K. Dharani discusses the centrality of relational trauma in developmental psychopathology frameworks for the development of borderline personality vulnerabilities. She describes key findings from her research with 60 individuals diagnosed with borderline personality disorder using self-report and task-based measures and interview narratives. The findings highlight the experience of polyvictimization and suggest that it is the perceived impact of trauma, rather than the presence/number of forms of trauma, that is predictive of the severity of borderline vulnerabilities. The link between early relational trauma and the development of the capacity to mentalize has implications for continued difficulties and dysfunction in adult relationships. She advocates for a comprehensive assessment of complex trauma which includes diverse forms of trauma, the perpetrators involved, and the frequency and impact of these early adversities.

Dr. Kanika Mehrotra brings a focus to the potential intergenerational transmission of trauma through parenting behaviour and experiences. While parenting is a challenging enterprise for all, mothers with borderline personality vulnerabilities may encounter additional difficulties in this role. The ‘ghosts in the nursery’ metaphor has been used to link difficult early experiences of being parented and current experiences of parenting, but there is limited empirical research to support this reenactment of early relational trauma. She explores the role of parental mentalization as a potential mediator between this relationship between past and present with a specific focus on early experiences of being parented and current experience of parenting stress, parenting satisfaction, and parental efficacy. She presents findings from a mixed-method case-control study of thirty mothers with borderline personality vulnerabilities and thirty mothers from the community and discusses implications for assessment and intervention.

Dr. Poornima Bhola critiques the place and positioning of trauma in the diagnostic frameworks for borderline personality vulnerabilities, and discusses the role of traumagenic contexts and systems. She discusses approaches to assessing experiences of trauma and associated disruptions in mentalizing in varied relational contexts, through measures adapted for or developed in an Indian context. Disruptions in the intergenerational cycle of trauma are inadequately addressed in the treatment of borderline personality and we advocate for the use of trauma-informed approaches and interventions to enhance prenatal mentalizing and parental mentalizing. Emerging trends related to the mentalization of trauma and the development of trauma-focused interventions are outlined.

Keywords: complex trauma, borderline personality, mentalization, parental reflective functioning, trauma-informed

1.10: Trauma-informed interventions

217/T1.10/S/26: Working with Complex Trauma and Dissociation

Authors: Dr. Adithy, Dr. Gayitri Bhatt, Sukanya Ray

Contact: adithy@gmail.com

Country: India

Abstract: With the introduction of Complex Post Traumatic Stress Disorder (cPTSD) in ICD-11, complex trauma has gained diagnostic value amongst clinicians. However, there is still a lack of consensus on the exact definition and understanding of complex trauma. What makes complex trauma complex? To complicate matters, the associated construct of dissociation, which invariably underlies the “lens” of trauma, is often missed as an underlying feature in PTSD and other disorders that may have “nothing to do with trauma.” Complex trauma and dissociation are not a single diagnostic entity but are undeniably present as underlying transdiagnostic phenomena in psychiatric disorders, including personality disorders. Historically, the study of dissociation has emerged from the interest and challenge in understanding the erstwhile category “hysteria,” which has later outgrown its implicit gendered perspective and sidetracked into the syndromal categories around mood, anxiety and personality in classification systems. The theoretical and empirical foundations of dissociation have deepened in the last half-century to enable clinicians to apply it as a lens, rather than a single diagnosis. Additionally, there has been a significant movement towards trauma-informed and trauma-focused approaches to treating psychiatric disorders, that deserve careful analysis. The symposium brings together three perspectives to introduce the lens of complex trauma and dissociation, and its applications. The objectives of the symposium are:

1. Elucidate the concept and constructs related to complex trauma and the underlying neurobiological foundations of trauma-focused therapy
2. Explicate the implications and usefulness of the phased approach in treating trauma and dissociation
3. Highlight the scope of training and supervision for clinicians in treating complex trauma.

Keywords: Complex trauma, dissociation, intervention, training, supervision

1.15: Others

249/T1.15/S/29: Transforming self-talk for Healing

Authors: Prof. (Dr.) Manju Agarwal, Dr. Madhu Pande, Saima Khan, Arya Aravind

Contact: manju.agrawal@gmail.com

Country: India

The human mind is a dynamic landscape where thoughts bloom into realities. Self-talk is the medium of the thoughts which generate feelings and actions. Self-talk is often referred as inner dialogue or internal chatter also. We talk to ourselves for almost 24X7. The manner in which we converse with ourselves lays the groundwork for our self-perception and emotional well-being. When self-talk is submerged in love and acceptance, it fosters a nurturing environment of compassion and resilience. Similarly, if it is steeped in self-blame and self-criticism, it will lead to low self-esteem, guilt, anger and/or revenge. The researchers here are exploring the process and impact of changing the self-talk for healing and recovery from stressful states of mind.

The importance of self-talk is well-accepted in the field of psychology and backed by research evidence. In the realm of Indian spirituality, B K Shivani of Bramhakumaris, a well-known

name, also says that when you remind yourself repeatedly that “I am a powerful soul” it becomes your reality. She is actually referring to the power of inner dialogues which creates relevant energy and becomes your personal truth. The chatter in our minds isn’t just random noise; it’s a powerful force shaping our emotions and actions. This symposium explores the impact of self-talk, backed by research evidence and real-life examples, shedding light on how it influences our present state and how can it be used for therapeutic purposes. In fact, I along with two of my research students are doing research to develop a therapy based on self-talk.

One of my students has done a pilot study on women suffering with premenstrual syndrome. She found immense improvement in their symptoms after she changed their self-talk. She will be presenting the results of the pilot study in this symposium. Another student has done a pilot study on young adults suffering from symptoms of anxiety, depression, anger etc. She also found amazing results with improvement in their wellbeing when she changed their self-talk.

Both the pilot studies have indicated the power of self-talk in healing and bringing improvement in the state of mental health. It was also observed that the clients improved significantly after 3 to 4 sessions in some cases. Most of them came out of their problem, for which they had come, only after 6 to 7 sessions. Our effort is to develop a structured process of transforming the self-talk as a research based therapy.

Key words: self-talk, premenstrual symptoms, well-being, young adults

ORAL PRESENTATIONS

1.11: Traumatic life events, women, and mental illnesses

14/T1.11/OP/4: Exploring Parental Burnout and Its Impact on the Psychological Capital of Working Women in India

Authors: Pallavi Neogy, Megha Kochhar

Contact: pallavineogy@gmail.com

Country: India

Abstract: Aim: This study aims to dissect the intricate relationship between parental burnout and psychological capital among working mothers in India. The rationale behind the study is to shed light on the multifaceted aspects of parental burnout and its repercussions on mothers' well-being and optimism.

Method: Utilizing a sequential explanatory mixed-methods design, we surveyed working mothers aged 21-50 from Delhi's NCR region who have at least one child aged 0-16. Quantitative data was collected using standardized scales for parental burnout and psychological capital, while qualitative insights were extracted through semi-structured interviews.

Results: Quantitative outcomes display significant negative correlations between parental burnout and psychological capital ($r = -0.44, p < .00001$), self-efficacy ($r = -0.30, p = 0.0027$), and optimism ($r = -0.20, p = 0.0413$). This emphasizes the degradation of well-being in working mothers experiencing burnout.

Qualitatively, multiple themes surfaced, revealing the complex dilemmas of working mothers. Challenges in fulfilling familial responsibilities while maintaining work commitments resulted in palpable emotional exhaustion. Anecdotal evidence spotlighted sacrifices in career advancement and guilt overparental involvement. Family dynamics, illustrated by intra-familial conflicts and societal pressures, exacerbated burnout levels. Personal attributes, like low frustration tolerance, were identified as catalysts for burnout, while proactive coping strategies correlated with better burnout management.

Conclusion: Our findings demonstrate that parental burnout is not a static condition but exists on a continuum. It reflects a range of fluctuating emotional states, from fulfillment to intense exhaustion. Acknowledging this continuum emphasizes the nuanced, multifaceted nature of parental burnout. Influenced by a constellation of factors, including work demands, societal expectations, family dynamics, and individual coping mechanisms, burnout manifests as a fluid experience subject to change over time. This comprehensive understanding mandates the development of targeted interventions and robust support systems to mitigate the varying degrees of burnout and fortify psychological capital, thereby fostering a healthier work-life equilibrium.

Keywords: parental burnout, psychological capital, working mothers, qualitative analysis, well-being, work-life balance

1.9: Hospital, school, community, and home-based trauma interventions

28/T1.9/OP/11: A Randomised Controlled Trial of The Effectiveness of Group Cognitive Behavioural Therapy on Depression, Negative Automatic Thoughts, Anxiety, Self-Esteem and Anger Among Adolescents in Shelter

Authors: Ding Wai Eng, Firdaus Mukhtar, Hamidin Awang, Lye Mui Sann

Contact: drfirdaus@upm.edu.my

Country: Malaysia

Abstract: Literature on adolescents from sheltered homes in Malaysia is scarce. This randomized controlled trial aimed to determine the effectiveness of group cognitive behavioral therapy (gCBT) known as the SAHABAT program versus a waitlist control on various psychological factors among orphaned adolescents in Malaysian sheltered homes. The study involved nine sheltered homes, with the SAHABAT group consisting of 4 homes (n = 71 adolescents) and the waitlist control group comprising 5 homes (n = 68 adolescents). The intervention group attended 8 sessions of SAHABAT programme over one month. Data were collected at six time-points: pre-intervention, mid-intervention, immediate post-intervention, and at 1-month, 3-month, and 6-month intervals after the intervention. In this study, we employed a generalized linear multi-modelling statistical analysis within the context of multi-stage cluster sampling.

Results revealed significant and varying effects over time. The SAHABAT program showed superiority over the waitlist control in reducing depression, anxiety, negative automatic thoughts (NAT), and anger, with effect sizes ranging from small to moderate. Moreover, only the SAHABAT group exhibited a significant reduction in these factors from pre-intervention to 6-month post-intervention. In contrast, the SAHABAT program was notably more effective in enhancing self-esteem compared to the waitlist control, with a significant increase observed over time, supported by a moderate effect size. The reductions in depression, anxiety, NAT, and anger were mostly mild to minimal, while the increase in self-esteem was notable.

In conclusion, the SAHABAT program proved effective in alleviating symptoms of depression, anxiety, NAT, and anger, and promoting self-esteem over the course of the study. These findings have significant implications for the treatment of mental health issues among adolescents, particularly those in sheltered homes, and can inform national policies to better address the needs of this vulnerable population.

Keywords: Adolescents, anxiety, depression, group cognitive behavioural therapy, negative automatic thoughts, self-esteem

1.15: Others

29/T1.15/OP/12: Improving Life With Vitiligo Through Cognitive Behavior Therapy

Authors: Rachna Sharma, Fatima Shahnawaz

Contact: sharmarachna081@gmail.com

Country: India

Abstract: Vitiligo is skin conditions that can make people feel really upset. It causes white patches on the skin and can affect how a person thinks and feels about themselves. Apart from

medical treatments, Cognitive Behavioral Therapy (CBT) can help a lot. The present study explore on investigating the effects of cognitive behavior intervention on discrimination and stigma, mood state, and psychological well-being among individuals with vitiligo. Vitiligo can significantly impact a person's mental state due to the visible changes in appearance and potential social stigmatization. The study aimed to explore if cognitive behavior therapy could alleviate these effects. The study included a total of 30 vitiligo patients, both male and female, aged between 18-45 years. Discrimination & Stigma Scale (developed by Prof. Graham Thornicroft in 2008) was used to measure discrimination and stigma levels. Eight State Questionnaire (8SQ) scale (Indian Adaptation by M Kapoor, M Bhargava) was used to assess mood states. Data was collected by administering the mentioned scales before and after cognitive behavior intervention. Statistical analysis was conducted to determine the differences between pre-test and post-test results in the experimental and control groups. The results indicated a positive relationship between the experimental and control group interventions. The mean value of the post-test in the Cognitive Intervention group was higher than the pre-test, indicating a positive impact. The differences were statistically significant in discrimination and stigma, mood state, and psychological well-being between the pre-test and post-test in the Cognitive Intervention group. The study concluded that cognitive intervention played a significant role in reducing discrimination, stigma levels and psychological well-being in individuals with vitiligo. This suggests that cognitive behavior therapy is like a helpful guide for our thoughts and feelings. It helps people with vitiligo feel less stressed, less sad, and more confident about how they look. It also teaches them ways to handle tough situations and feel better about themselves. By using CBT alongside medical care, we can make life better and happier for people with vitiligo.

Keywords: Vitiligo, Discrimination, Stigma, Cognitive, Intervention

1.7: Transdiagnostic CBT for PTSD in adolescents and adults

42/T1.7/OP/17: The Adaptation and Efficacy of TF - CBT to Improve Post-Traumatic Stress Disorder, Depression and Social Cognitive Abilities among Adolescents in Residential Care Facilities in Malaysia

Authors: Firdaus Mukhtar, Liza Hartini Rusdi, Nor Sheereen Zulkefly

Contact: drfirdaus@upm.edu.my

Country: Malaysia

Abstract: This study is a parallel design randomized controlled trial that aims to study the feasibility and efficacy of the adapted Trauma – Focused Cognitive Behavioral Therapy (TF - CBT) in Malaysia to improve post-traumatic stress disorder (PTSD) symptoms, depressive symptoms, and social cognitive abilities among adolescents in residential care facilities. Participants are adolescents aged 13 to 14 years old who have experienced one or more episodes of abuse such as sexual abuse or physical abuse and have developed post-traumatic disorder symptoms. Participants will be screened using the Mini-Mental State Examination (MMSE) for cognitive functioning, the UCLA PTSD Reaction Index (PTSD-RI) for Children and Adolescents - DSM 5 for PTSD and the Child Depression Inventory (CDI) for depression. Participants with severe cognitive impairment, active suicidal ideation and problematic substance use that is affecting their functioning are not eligible. Data will be collected from

local welfare institutions for children, Rumah Kanak Kanak in Selangor and Perak. Using a double-blind method, 242 participants will be randomised to either the 1) intervention group, where they will receive TF - CBT over 8 group sessions or the 2) control group, where they will be given psychoeducation and taught relaxation skills over the same number of sessions. Follow-up sessions will be conducted at 1 month, 3 months and 6 months post-termination. To measure feasibility, the participants' and caregivers' attendance and the Client Satisfaction Questionnaire – 8 will be used to measure commitment and satisfaction towards the intervention. The PTSD-RI and the CDI will be used to measure post-traumatic symptoms and depressive symptoms respectively at baseline, termination and also at each follow-up point. For measures of social cognitive abilities, the Strange Stories task will be administered to test mentalizing ability, the Animated Full Facial Expression Comprehension Test (AFFECT) and the Interpersonal Reactivity Index (IRI) will be used to measure social perception and affective empathy of the participants at baseline, termination and follow-up points. The Aggression Questionnaire and the Barratt Impulsiveness Scale - Short Form will be utilised to assess aggression and impulsivity respectively. The study hypothesised that participants would show improvements in terms of their depressive, and post-traumatic symptoms and social-cognitive abilities following 8 group sessions of the adapted TF-CBT.

Keywords: Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), adaptation and efficacy, Post-Traumatic Stress Disorder (PTSD), depression, social cognition

1.15: Others

57/T1.15/OP/23: Cognitive distortions, Rape supportive attitude, and Sexual fantasy among male prison inmates convicted for rape

Authors: Apoorva Choudhary, Dr. Nitesh Kumar Jha

Contact: choudharyapoorva95@gmail.com

Country: India

Abstract: Sexual violence, particularly rape, represents a grave societal concern with severe implications for survivors and the community at large. This paper delves into the complex web of cognitive distortions, rape-supportive attitudes, and sexual fantasies among male prison inmates convicted of rape. Understanding these psychological constructs within this specific population is vital for crafting effective rehabilitation programs that aim to reduce recidivism rates. Drawing data from a sample of 120 male prison inmates incarcerated for rape convictions, this study utilizes The RAPE scale by Bumby (1996), Rape supportive attitude scale by Lottes (1998) and Sexual fantasy questionnaire- Revised- Shorter version by Bartels & Harper (2018) measures to unravel the relationships between cognitive distortions, rape supportive attitudes, and sexual fantasies. Descriptive statistics and Correlation analysis is used to analyse the data. The results divulge significant correlations: a robust positive link between cognitive distortions and rape supportive attitudes, as well as a compelling association between cognitive distortions and the sexual fantasies. Additionally, participants with more pronounced rape supportive attitudes reported a higher prevalence of such sexual fantasies. These findings underscore the intricate interplay between cognitive distortions, rape supportive attitudes, and sexual fantasies within this population. As such, they hold significant implications for the design and implementation of rehabilitation programs within correctional settings. In

conclusion, this research contributes valuable insights into the psychological dynamics of individuals convicted of rape, shedding light on potential areas. The implications of these findings for prevention and intervention efforts are discussed.

Keywords: Cognitive Distortions, Rape Supportive Attitude, Sexual Fantasy

1.9: Hospital, school, community, and home-based trauma interventions

85/T1.9/OP/39: Thinking Aloud or Screaming Inside: Exploratory Study of Sentiment Around Work

Authors: Nuzhat Jahanara, Ilya Andreev, David A Clifton, Md Razon Hossain, Marzia Hoque Tania

Contact: nuzhat1712@gmail.com

Country: Bangladesh

Abstract: Background: Millions of workers experience work-related ill health every year. The loss of working days often accounts for poor well-being because of discomfort and stress caused by the workplace. The ongoing pandemic and post-pandemic shift in socioeconomic and work culture can continue to contribute to adverse work-related sentiments. Critically investigating state-of-the-art technologies, this study identifies the research gaps in recognizing workers' need for well-being support, and we aspire to understand how such evidence can be collected to transform the workforce and workplace.

Objective: Building on recent advances in sentiment analysis, this study aims to closely examine the potential of social media as a tool to assess workers' emotions toward the workplace.

Methods: This study collected a large Twitter data set comprising both pandemic and pre-pandemic tweets facilitated through a human-in-the-loop approach in combination with unsupervised learning and meta-heuristic optimization algorithms. The raw data preprocessed through natural language processing techniques were assessed using a generative statistical model and a lexicon-assisted rule-based model, mapping lexical features to emotion intensities. This study also assigned human annotations and performed work-related sentiment analysis.

Results: A mixed methods approach, including topic modeling using latent Dirichlet allocation, identified the top topics from the corpus to understand how Twitter users engage with discussions on work-related sentiments. The sorted aspects were portrayed through overlapped clusters and low intertopic distances. However, further analysis comprising the Valence Aware Dictionary for Sentiment Reasoner suggested a smaller number of negative polarities among diverse subjects. By contrast, the human-annotated data set created for this study contained more negative sentiments. In this study, sentimental juxtaposition revealed through the labeled data set was supported by the n-gram analysis as well.

Conclusions: The developed data set demonstrates that work-related sentiments are projected onto social media, which offers an opportunity to better support workers. The infrastructure of the workplace, the nature of the work, the culture within the industry and the particular organization, employers, colleagues, person-specific habits, and upbringing all play a part in the health and well-being of any working adult who contributes to the productivity of the organization. Therefore, understanding the origin and influence of the complex underlying factors both qualitatively and quantitatively can inform the next generation of workplaces to

drive positive change by relying on empirically grounded evidence. Therefore, this study outlines a comprehensive approach to capture deeper insights into work-related health.

Keywords: work-related mental health; sentiment analysis; natural language processing; occupational health; Bayesian inference; machine learning; artificial intelligence; mobile phone

1.15: Others

87/T1.15/OP/40: Efficacy of Eclectic Play Therapy on Lived Experiences of Children and Adolescents with Dissociative Disorders: A Mixed Method Intervention Study: A Pilot Study

Authors: Ankita Vijay Raipure, Priyanka Lenka, Nishant Goyal,

Contact: ankitaraipure16@gmail.com

Country: India

Abstract: Children and adolescents face lot of experiences, due to which they show emotional-based style of functioning, they are unable to cope with anxiety and regulate emotions along with self-esteem issues. Play therapy has been shown to be an effective medium to reach out for lived experiences and working on the coping difficulties, and self-esteem issues. The study intends to introduce a holistic model among the population that would with a biological, psychodynamic and cognitive approach to work towards various impacted areas in children and adolescents with Dissociative disorder.

Methods: The sample consisted of 10 adolescents in the age group of 10-18 years admitted to the Central Institute of Psychiatry (CIP) with a diagnosis of Dissociative Disorder. Out of which 5 were taken in the study group and received the eclectic Play Therapy based comprehensive intervention and 5 participants were in the control group who received treatment as usual. The proposed intervention module consisted of 12 sessions with 45-60 minute sessions every alternate day. Participants completed self-report measures of lived experiences Anxiety, Depression, Coping, Emotion regulation, Self-esteem and event related potentials pre and post treatment.

Results: to be discussed later

Discussion: to be discussed later

Keywords: Children, adolescents, Lived experiences, anxiety, Depression, Emotion regulation, Self-esteem, Event-related potential and Play Therapy

1.10: Trauma-informed interventions

96/T1.10/OP/44: Mediating role of Dysfunctional attitudes in the Relationship between Childhood trauma and Marital satisfaction

Authors: Dr. Chinu Agrawal, Tanu Choksi, Shweta Puri

Contact: feelingmindsindia@gmail.com

Country: India

Abstract: Trauma experienced in childhood is being investigated as a potential predictor of overall well-being and quality of life of people in recent years. Childhood trauma could have a

significant relationship with marital satisfaction. Besides trauma, dysfunctional attitudes towards relationships could also have a bearing on relationship satisfaction. This study aims to explore the mediating role of dysfunctional attitudes in the relationship between childhood trauma and marital satisfaction. There will be a possibility of addressing Dysfunctional attitudes through CBT based interventions to enhance marital satisfaction among couples having a history of childhood trauma. Data will be collected online from 100 participants including both genders who have been married for at least 3 years. Standard Questionnaires will be used :Trauma History Screen by Carlson et al., Dysfunctional Attitude Scale by Weissman and Beck, Couples Satisfaction Index by Funk and Rogge. Pathway Analysis and other appropriate correlation techniques will be used to analyze the data. Results will be shared during the presentation.

Keywords: childhood trauma, relationship satisfaction, dysfunctional attitudes, CBT interventions

1.13: New tools in the field of trauma psychology

105/T1.13/OP/47: ASSIST: A proposed modular intervention plan for treatment of the cPTSD-EUPD continuum

Authors: Dr Rayani Dessa, Parth Sharma

Contact: rayani@mindtalk.in

Country: India

Abstract: Recent theoretical and empirical findings demonstrate that cPTSD and EUPD diagnosis share core underlying vulnerabilities such as marked affect regulation, fragmented sense of self, marked difficulties in sustaining relationships and significant impairments in social-occupational, educational, personal, family and other areas of functioning, however, there are no current transdiagnostic interventions that treat these common factors across that continuum. Current evidence-based treatments for EUPD and PTSD such as the gold standard psychotherapies CBT and DBT are heavily manualised and linear in their approach to treatment. The client's individual differences and their cultural and contextual factors often interfere in this linear approach giving rise to a need for a flexible and nonlinear treatment plan. ASSIST is a proposed protocol curated to fit the client's needs while fostering individualisation to address comorbidities or other therapeutic roadblocks. It focuses on five modules; Affect and Symptom Regulation, Seeking Safety, Interpersonal Re-integration, Self Reflexivity and Thought Re-appraisal. These modules are flexible, not time-restrictive and can be administered by any mental health professional trained in the protocol. This protocol for ASSIST is designed to explore common features on the continuum over single disorder treatment based on the existing theoretical framework of MATCH ADTC. Techniques used under each module of ASSIST borrow from pre-existing evidence-based treatments such as Acceptance and Commitment Therapy, Trauma Focused CBT, Mindfulness-Based Cognitive Therapy, Narrative Exposure Therapy, Cognitive Processing Therapy, EMDR, Mentalization-Based Treatment and Dialectical Behavioural Therapy. The protocol here focuses on a stepwise flowchart proposed to be used as a 'stand-alone' or as a combination plan according to the symptomatology presented during therapy. The modules under ASSIST provide the clinician with a comprehensive systematic marker to choose from to combat the interferences that occur

during the therapeutic process and to facilitate the immediate needs of the client. The authors describe measures and outcomes for each module and provide an example of the application of this new conceptual framework. The authors encourage clinicians and researchers to use ASSIST as a therapeutic aid in their treatment of cPTSD/ EUPD.

Keywords: cPTSD, EUPD, Modular Intervention, Theoretical Framework, Transdiagnostic approach

1.4: Complex Trauma & Complex PTSD

124/T1.4/OP/56: From Trauma To Growth: How Narrative Exposure Therapy Aided The Healing Journey of Adolescent Survivors Of Human Trafficking In India

Authors: Sheeba Shamsudeen, Preeti Gupta, Neha Sayeed, Sanjay Kumar Munda

Contact: sheeba.dr@gmail.com

Country: India

Abstract: Human trafficking is considered modern-day slavery, a violation of an individual's fundamental rights, and an open wound on the body of contemporary society. India is home to 14 million survivors of human trafficking. Although sex trafficking is globally considered the most lucrative, India witnesses many adolescents trafficked for forced labour, domestic servitude, and forced marriages.

Aim: The aim of the present study is to assess and compare the efficacy of Narrative Exposure Therapy for Traumatized Children and Adolescents (KIDNET) on trauma symptomatology, psychological distress, post-traumatic growth, and resilience among adolescent female survivors of human trafficking and with those in a waitlist control group.

Methodology: A cross-sectional study was conducted with 30 adolescent girls aged 13 to 18 years, living in shelter homes run by Child Protection Scheme and Child Welfare Committee in Ranchi, Jharkhand. Using purposive sampling, the participants were randomly allotted to two groups with the clinical group (N = 20) receiving KIDNET sessions and the waitlist control group (N = 10) receiving intervention after a waiting period of 4 weeks. Trafficking Victim Identification Tool, SPM, and Kessler's Psychological Distress Scale were used to screen for trafficking-related symptoms, whereas the Clinician-Administered PTSD Scale for Children and Adolescents, Post-Traumatic Growth Inventory, and Adolescent Psychological Resilience Scale were administered to measure the other variables under study. Statistical analysis was done to assess the variables at pre-intervention, mid-intervention, and immediate post-intervention using repeated measures ANOVA.

Summary of Results: The findings suggest KIDNET was effective in symptom reduction. There was a significant difference in psychological distress and PTSD symptoms in the clinical group. KIDNET participants experienced significantly greater after-treatment reductions in psychological distress, PTSD symptoms of intrusion, avoidance, cognition, and distress measures than the waitlist control group. Survivors showed significant improvement on the measures of post-traumatic growth and resilience, while a moderate to large effect size was seen in PTSD symptoms.

Conclusion: The findings suggest that KIDNET may be effective in reducing core psychopathology and may also reduce distress and other trauma-related symptoms with better treatment outcomes. The study also showed that KIDNET works with not only symptom

reduction but also improving survivors' growth and resilience. The study needs to be replicated with a larger sample to understand the generalizability of the findings. However, KIDNET is effective in managing trauma-related symptoms.

Keywords: Human Trafficking, Gender Based Violence, Adolescents, Survivors

1.2: CBT for grief management

144/T1.2/OP/64: Prolonged Grief & Perceived Stress Among College Students: Implications of Cognitive Behavioural Interventions

Authors: Ananya Nag, Dr. Susmita Halder, Ms. Alifya Hussain, Shrestha Sen Gupta

Contact: ananyanag2@gmail.com

Country: India

Abstract: Grief and Stress provoke intense negative emotions along with feelings of helplessness. This has an adverse effect on students' success, often resulting in difficulty in dealing with everyday functioning. College students experience psychological and physical stress along with prolonged grief due to loss of a loved one that often has adverse long-term impact on the individual. A study was conducted on 210 college students, to understand the grief and stress during COVID-19 pandemic. Out of them, 80 participants were included in a follow-up study that aims to find out the current status of grief and stress among the participants. The study was conducted across West Bengal by administering Perceived Stress Scale (PSS) and Prolonged Grief Scale (PG-13) on 80 participants.

Summary & Result: The follow-up study revealed that significant number of individuals amongst the ones selected for the follow-up, have shown signs of prolonged grief and perceived stress.

Conclusions: As the follow-up study revealed that since there are considerable number of individuals with unmanaged prolonged grief and perceived stress that may inhibit their daily functioning, this study implies that Cognitive Behavioural Intervention sessions may prove effective on participants who exhibit high levels of stress and prolonged grief.

Keywords: Grief, Stress, Students, Cognitive Behavioural Interventions

1.7: Transdiagnostic CBT for PTSD in adolescents and adults

170/T1.7/OP/81: Young adults' change experience in Trauma-Focused Cognitive Behavioral Therapy with a history of interpersonal trauma: a case series

Authors: Arunashree B, Veena Satyanarayana

Contact: b.aruna2008@gmail.com

Country: India

Abstract: Adverse childhood experiences (ACE) have been found to be a significant predictor and risk factor for the development of mental disorders in adulthood. A wide range of mental health disorders like post-traumatic stress, depression, anxiety, dissociation disorder, etc have been associated with traumatic experiences. Experiences of such nature impact domains of

natural development like self, emotional awareness, interpersonal etc. When such difficulties compound with the existing challenges of a transitional age group, the mental health consequences could be multi-fold. One such vulnerable population is the Transitional Age Youth, 18 to 25 years young adults.

Therefore, an intervention that targets processing these traumas along with building capacities to cope with age-related challenges becomes important. Trauma-focused Cognitive behavioral therapy is one such evidence-based treatment plan that integrates CBT modules with narrative principles for holistic healing and skill building among younger age groups. Recent trends in research have indicated that TF-CBT can be expanded and adapted for young adults with a similar framework.

The current study aims to add evidence to the trend along with gaining an understanding of the client's perspective on change. As part of a doctorate program, data obtained from 6 clients who underwent the TF-CBT intervention have been used for the purpose of this study. Six clients between the age group of 20-25 were recruited with a history of interpersonal trauma and varied co-morbid conditions like PTSD, depression, anxiety, dissociation etc. Sessions were carried out weekly ranging between 15-20 sessions in a phasic manner. Client's PTSD symptoms, Depression and Anxiety levels and subjective well-being were assessed across 4 timepoints- baseline to 1-month follow-up. Qualitative data was obtained from a detailed interview at the end of treatment that involved aspects of TF-CBT phases, useful and helpful techniques, and perceived change through therapy. Results gathered help in a deeper understanding of internal processes of client's experience along with validation of the usefulness of TF-CBT approach and techniques.

Keywords: Trauma, interpersonal trauma, PTSD, trauma-focused therapy, change mechanism, transitional age youth

1.11: Traumatic life events, women, and mental illnesses

179/T1.11/OP/88: Relationship between depression, anxiety, distress and somatization with duration of illness in caregivers of cancer patients

Authors: Phurailatpam Rajluxmi Sharma, Sameeta Ng, L Roshan Singh

Contact: rajluxmiphura@gmail.com

Country: India

Abstract: The experience of cancer and its treatment has affected family members and in particular the primary caregivers. Being a caregiver of cancer can be very stressful. Aim: This study aims to investigate the relationship between depression, anxiety, distress and somatization with duration of illness in caregivers of cancer patients. Methodology: A cross sectional study design was implemented in the present study and employed a quantitative research approach. A sample size of 120 caregivers of patients diagnosed with cancer (n=120) who are above 18 years of age, were selected from department of Radiation-Oncology, RIMS, Imphal using stratified random sampling. Socio-demographic data sheet, consent form and 4-Dimensional Symptom Questionnaire were used. Data were coded and analyse using SPSS software. Descriptive statistic and chi square were used. Results: Present study suggest that there was no significant relationship between depression (p-value=0.332), distress (p-value-0.428) and somatization (p-value=0.078) with duration of illness, whereas significant

relationship was found between anxiety and duration of illness (p-value=0.049). It was found that anxiety was strongly elevated in caregivers of cancer patients who were diagnosed with cancer below one year duration (33%). Conclusion: Significant relationship was found between anxiety and duration of illness with strongly elevated score found during first year of illness. The reason might be because it was very sudden and they did not know how to cope with it. Therefore, it is implicated that finding new effective intervention strategies is need of the hour.

Keywords: cancer, anxiety, depression, somatization, distress, caregivers

1.1: CBT for disaster trauma

188/T1.1/OP/95: Cognitive Behavior Therapy for Post-disaster Distress Children in Rural Bangladesh

Authors: Khondoker Mokaddem Hossain

Contact: mokaddemdu@Yahoo.com

Country: Bangladesh

Abstract: This study examines the nature of disaster-based psychological trauma and vulnerability that the children face in rural Bangladesh. The study explores how children in rural Bangladesh suffer from different kind of anxiety, stress, fear, depression, sadness, uncertainty, insecurity, sleep disruption, distressing dreams, irritability, frightening mentality, difficulty in concentrating in educational attainment, and feel helplessness once a devastating disaster like cyclone/flood/tornado/landslide hits and devastate the locality including their dwelling houses, standing crops, infrastructure, water and sanitation system, transportation and communication system, public health facilities, educational institutions, income and means of livelihood of families and community people, and forced them to take shelter or refuse in a most unfamiliar shelter place, located in isolation where they are detached from parental care, love, affection and social security. This study further examines why are children at risk for mental health issues after a disaster occurred in the context of uncertainty, lack of coping and controlling capacity, and lack of immediate psycho-social support. The research also examines why the signs of children's mental stress immediate after a disaster failed to address the negative effects of trauma, including processing their traumatic memories, overcoming problematic thoughts and behaviors, and developing effective and strong coping and interpersonal skills through proper counselling and therapies. Finally, the study examines the potentiality of introducing the Trauma-focused cognitive behavioral therapy (TF-CBT) as part of evidence-based treatment approach for supporting disaster stressed children, adolescents, and their parents or other caregivers to overcome trauma-related difficulties on the eve of disastrous catastrophe, risks, hazards, emergency, and vulnerability. Moreover, the study will provide some guiding principles in designing pragmatic policy framework to reduce negative emotional and behavioral responses following disaster havocs and risks, including sexual harassment, abuse and other maltreatment, violence, material losses, multiple traumas, and other traumatic events as well as providing congenial environment in which children would be encouraged to talk about their traumatic experiences and learn skills to overcome the disastrous situations including disastrous stressors. The study will follow the qualitative methodological strategy to assess the mental and other stresses that are faced by the children during and after disasters. Finally, the study would like to develop a policy strategy so that the disaster affected

traumatized children would be able to develop their own cognitive and coping skills and strategies, to bring changes to their own thinking, and disaster related problematic emotions, and behavior, that would be supportive to address the disastrous trauma with better understanding of the behavior and motivation of children, parents, caregivers, and community people.

Key Words: CBT; Children, Disaster, Trauma, Coping Mechanism and Remedial Measures

1.10: Trauma-informed interventions

214/T1.10/OP/105: Romantic relationship break- up : Outline of a brief trauma intervention

Authors: Maneesha Mohandas, Dr. L.N. Suman

Contact: maniishamohandas@gmail.com

Country: India

Abstract: Losing a loved one is inevitable. While the majority of them are able to cope up to the loss of an intimate relationship, some of them go through a painful road of recovery. Relationship break- up and the trauma following it can be characterized by anger towards the partner, betrayal feeling, confusion about one's identity and significant impact on their quality of life followed by functional impairment. They also present with symptoms of grief that follows an incessant yearning for the loved one. Aim and Methodology: To develop a brief intervention for trauma due to romantic relationship break- up. The intervention consists of an average of 10 face to face sessions of 45 minutes. Based on review of literature the intervention module consisted of empathic listening, verbalizing the loss of the loved one, developing an understanding of the problematic aspects related to loss, stabilizing the client, exploring and developing their social support network and improving self- compassion. The intervention was carried out on two female clients of mean age 30 years and both were post graduates. Summary of results: Client 1 reported 90% improvement with respect to her mood, self- care and emotional regulation while client 2 reported 80% improvement with respect to sense of self (increase in self- confidence, improved social interaction and started indulging in pleasurable activities). Conclusion: The study has implications for developing trauma focused intervention specifically for relationship break- up trauma.

Keywords: Relationship break-up, trauma, betrayal, grief

1.11: Traumatic life events, women, and mental illnesses

267/T1.11/OP/122: Loss and Grief focused CBT for Pregnancy Loss: A Hospital-based Double-blind Randomized Control Trial

Authors: Dr. Sujata Satapathy, Dharaa Gupta, Usha Devi, Shraddhesh Kumar, Dr.Vatsla Dadhwal, Dr. Kapil Yadav, Dr. Rajesh Sagar, Dr. Archana Kumari

Contact: sujatasatapathy2022@gmail.com

Country: India

Abstract: The study examined the efficacy of a trauma-loss and grief-focused intervention for women with recurrent pregnancy loss. A therapist-facilitated, bi-lingual, brief, loss-trauma-

grief-focused, culturally suitable, and CBT-based GRIP Psychological Intervention (GRIP-PL) had good content validity. 6 weekly sessions (total 12 hours) with six sub-modules were delivered. The intervention was pilot-tested on 16 women 8 each from community clinic and hospital set up. Feasibility analysis was done across 14 established indicators. The field trial was done in a hospital OPD set-up, following a double-blind randomized controlled trial design. The study has clinical trial registration number REF/2022/03/041342. 107 pregnant women (18-45 years) meeting the inclusion criteria were recruited. A manual permuted randomized block design was used to randomly allocate women to either the experimental (N=52) or to the control group (N=55). The participants and assessors were allocation-blinded. The mean age of the participants was 27.09. Both groups were comparable at baseline and met cut-off criteria on the Perinatal Grief scale (PNGS>91). On immediate post-assessment, both groups differed significantly on GHQ-28, HADS, PNGS, Impact of Events Scale-Revised (IES-R), Impact of Miscarriage Scale (IMS), Self-Reporting Questionnaire (SRQ), and Kessler Psychological Distress Scale (K-10). GRIP-PL had large effects on all domains of PNGS (active grief, despair, coping difficulty), SRQ, IES-R, HADS (anxiety and depression), and all domains of IMS (loss of baby, devastating events, isolation). Telephonic follow-up was done 3-4 months after post-intervention. GRIP-PL is an efficacious intervention for recurrent PL.

Keywords: CBT, GRIP-PL, Pregnancy Loss, Trauma-loss and grief-focused intervention

1.9: Hospital, school, community, and home-based trauma interventions

277/T1.9/OP/128: Integrating Therapeutic Approaches for Addressing Psychological Traumatic Life Events in Individuals with Multiple Disabilities

Author: Sharma Suman Balrambhai

Contact: suman.psyvg@aiipmr.gov.in

Country: India

Abstract: This theoretical research paper explores the synergistic application of Cognitive-Behavioral Therapy (CBT), Jacobson's Progressive Muscle Relaxation (JPMR), and Client-Centered Counselling (CCC) to address the complex challenges arising from psychological traumatic life events in individuals with multiple disabilities. The study delves into the theoretical foundations of each therapeutic approach and examines their potential integration to provide a comprehensive and tailored intervention for this unique population. Drawing on existing literature and theoretical frameworks, the paper highlights the importance of an inclusive and adaptable therapeutic model that acknowledges the diverse needs and communication styles of individuals with multiple disabilities. The theoretical synthesis aims to contribute to the development of more effective and person-centered interventions, fostering resilience and promoting psychological well-being in this often overlooked demographic.

Keywords: Cognitive-Behavioral Therapy (CBT), Jacobson's Progressive Muscle Relaxation (JPMR), Client-Centered Counselling (CCC), Psychological Traumatic Life Events, Multiple Disabilities, Inclusive Therapy

308/T2.15/OP/132: Moving Towards an Interoceptive Model: Trauma, Mind-Body Connection and Interoceptive Awareness as Predictors of Dissociative Disorder

Authors: Amandeep Singh Garaya, Dr. Pooja Mahour, Dr. Bandana Gupta, Dr. Pawan Kumar Gupta, Manjistha Datta

Contact: aman.garaya13@gmail.com

Country: India

Abstract: Dissociative Disorder (DD) can be explained as a failure of integration between sensations, knowledge of self, affect and behaviour across the temporal continuity of our consciousness. Patients with DD often display significantly embellished appraisal of the interactions between their subjective experience and autonomic arousal during the cascade of emotionally evocative events which further leads to a temporal breakage of consciousness and self, all of which could be caused and/or exacerbated by trauma.

However, a comprehensive study of interoception & metacognition, and how it impacts the mind-body connection in DD has not been done.

This study aimed to understand the associations of Interoceptive Awareness, Mind-Body Connection, Self-Awareness, Self-Regulation and Trauma with DD and healthy controls and assess the variables which predict the probability of DD.

Methods: A cross-sectional study was carried out with a sample of 82 participants (40 DD patients and 42 Healthy Controls) recruited from the Psychiatric OPD of King George's Medical University (KGMU), and colleges. The data was collected using a sociodemographic details form, GHQ12, SDQ, MAIA-2, EMQ, GPS, SRIS and BSCS. Point Biserial Correlation was used to study the associations between the variables and binary logistic regression was used for predictive analysis.

Results: Results showed that trauma, interoceptive awareness, insight and mind-body connection showed significant positive correlations with DD whereas self-awareness and self-regulation showed no significant correlations with DD. There was a significant predictive model for DD with trauma, mind-body connection and interoceptive awareness which explained higher proportion of variance compared to trauma alone.

Conclusion: Patients with DD have had increased exposure to traumatic events which deteriorates their ability to consistently appraise the interactions between their autonomous arousal and their emotions, inducing a state of disharmony with their interoceptive self. This disharmony is further slivered by their lack of insight into their own indisposition, eventually steering them towards a temporal break in their mind-body connection.

Keywords: Interoceptive Model, Trauma, Mind-Body Connection, Dissociative Disorder

1.5: Abuse-focused CBT for child abuse and maltreatment

2.7: CBT for chronic and specific medical conditions

311/T2.7/OP/135: Effectiveness of Cognitive Behavioural Therapy on Irritable Bowel Syndrome: A Systematic Literature Review

Authors: Varsha, Priyanshu Dagar and Shivani Tokas

Country: India

Abstract: Irritable bowel syndrome (IBS) is a common chronic gastrointestinal syndrome characterized by abdominal pain, bloating, and altered bowel habits. It has created a significant impact on both society and patients' well-being. Recent shreds of evidence have shown that the brain–gut axis plays a key role in the disorder, and the presence of psychological factors and central processing deficits contribute to symptom severity and disability. A systematic review was conducted using existing bodies of literature available on authentic and reliable sources on the internet such as Google Scholar, peer-reviewed articles, research gate, PubMed etc., that investigate the effectiveness of cognitive behavioral therapy (CBT) in patients diagnosed with IBS has proven significant outcomes in reducing the severity of symptoms and levels of psychological distress of IBS that alter the quality of life of an individual. The majority of studies met the inclusion criteria that reveal variations in treatment protocols and delivery methods demonstrating the effectiveness of CBT involving exposure-based treatments and internet-based treatment models to target visceral anxiety contributing to symptoms. Cognitive Behavioral Therapy is demonstrated as an effective intervention for managing symptoms and improving the overall well-being of individuals with irritable bowel syndrome but the clinical presentation and management of IBS varies depending on geographical regions, socio-cultural, and psycho-social factors, and individual dietary habits. Lastly, this review analyses that despite the clear benefits of CBT for IBS, very few patients have access to this specialized approach.

Keywords: Irritable Bowel Syndrome, Cognitive Behavioral Therapy, Systematic Review, Symptom Management, Psychological Intervention

314/T1.11/OP/138: Psychological Interventions for Sexually Abused Adolescents: A Systematic Review

Authors: Shreya Kulshreshtha, Sujata Satapathy, Rajesh Sagar, Renu Sharma, Reeta Mahey

Contact: shreyapsyaiims@gmail.com

Country: India

Abstract: Sexual abuse leads to an enormous adverse psychological impact on the victim who was rendered helpless in an overwhelming situation. The trauma thus experienced could lead to profound psychological disturbances in the form of acute stress disorder, PTSD, depression, anxiety and dissociative disorders. There is a dearth of literature on interventions for sexual abuse in adolescence with most researches being focused either on interventions for child sexual abuse (CSA) or the psychological impact of sexual abuse on children /adolescents. A search was performed using MEDLINE, PubMed, PsycINFO, and Google Scholar from 2013 to 2023. Out of 168 potentially relevant studies 6 were included for the current review. The reporting format follows PRISMA guidelines. The interventions observed included immediate trauma focused treatment, affective and interpersonal regulation sessions, CBT and EMDR. One study was conducted in India which catered to the therapeutic challenges in psychological interventions in adolescents who have experienced sexual abuse. Discussion will focus on assessment and intervention in adolescent sexual abuse.

Keywords: Adolescent sexual abuse; psychological intervention; PTSD; trauma

POSTERS

1.9: Hospital, school, community, and home-based trauma interventions

21/T1.9/P/7: The Effectiveness of Brief Cognitive Behavioural Therapy on Psychological Distress among the elderly population undergoing orthopaedic surgery

Authors: R.Vivek Prasanna

Contact: vivekprasannar@sriramachandra.edu.in

Country: India

Abstract: This study is based on applying the concept of Brief Cognitive Behavioural therapy on the elderly admitted to the orthopaedic ward for surgery relating to orthopaedic trauma.

Here the participants are recruited within 24-48 hours and are approached for consent, Once they are scored and achieve a qualifying score of 26 and above in the MOCA test and a diagnosis of mild, moderate or severe in the DASS21 scale.

After they give consent for the study, the participants are then met with for 7 weeks during which the researcher will meet the patient once per week for around 30-45 mins max until the time of their discharge,

Should they discharge earlier, the therapy will be continued telephonically. And at the end of seven sessions the outcome assessor will be done by scoring the patents with DASS21 and the Barthel's index to assess if the Brief CBT had any effect on reducing their severity of depression, anxiety and stress and had a positive effect on their mobility.

Keywords: Brief CBT, Elderly, Orthopedic Trauma, Hospital Based Intervention

1.4: Complex Trauma & Complex PTSD

72/T1.4/P/30: CBT with Sexual Assault Survivors: Oscillating Recovery and the Paradox of Inner Disclosure

Authors: Leon Yang

Contact: leon8333@gmail.com

Country: Taiwan

Abstract: This study delves into the oscillating recovery patterns and the intrinsic paradoxes surrounding inner disclosure, using CBT as a lens and based on ten survivor testimonies. The aftermath of sexual assault is an intricate maze of emotions, oscillations, and paradoxes. The survivors' path to recovery, while individualized, reveals common patterns and challenges. CBT, an evidence-based therapy focusing on altering negative thought patterns, offers a structured approach to address the aftermath of such traumatic events. This study examines ten survivors' testimonies with CBT therapy, uncovering the multifaceted landscape of healing post-sexual assault.

Ten participants, who had undergone varying numbers of CBT sessions, were interviewed. Their feedback was meticulously categorized based on themes like emotional dysregulation, negative self-concept alterations, and intrusions often addressed in CBT.

The Dynamic Crisis Phase: All participants initially experienced a turbulent whirlwind of emotions. Through CBT's lens, these emotions are linked to ingrained cognitive patterns that

the trauma reinforces. The symptoms, as quantified by the PCL scale, varied from moderate to severe.

Oscillation in Recovery: In line with CBT's focus on identifying and challenging negative thoughts, survivors' scores on the PCL and ORS scales showed fluctuations. This points to the ongoing internal dialogue and recalibration that CBT encourages.

- a. Emotional Dysregulation: Participant one noted, "With CBT, I learned to recognize triggers and challenge my reactions. Once, I easily complained and felt tired; now I'm more stable emotionally."
- b. Negative Self-Concept Alterations: As CBT emphasizes reframing negative beliefs, survivors expressed shifts in self-perception.
- c. Intrusions and Threat Perception: Utilizing CBT techniques, testimonies revealed a gradual reduction in feelings of threat.

Multi-layered Inner Disclosure: One of CBT's strengths is aiding clients in delving into different cognitive layers, which was reflected in survivors' testimonies.

- a. Identity Reclamation: CBT's focus on reconstructing one's self-image post-trauma was evident in remarks like, "My experience is mine alone to define."
- b. The Outcry Dilemma: The act of vocalizing trauma, crucial in CBT, is therapeutic yet challenging.
- c. Empowerment vs. Exposure: CBT techniques facilitated empowerment but also revealed vulnerabilities.

'Coming Out' as Survivors: The process of externalizing the trauma, a key element of CBT, was a significant step for many survivors.

The Continuous Balance: The essence of recovery, as facilitated by CBT, is the continuous navigation of these paradoxes.

The journey of sexual assault survivors, examined through a CBT lens and evident from the ten testimonies, reveals a resilient human spirit. While recovery might seem daunting, understanding its complexity through frameworks like CBT can foster a compassionate environment for survivors.

Given the efficacy of CBT, counsellors should employ a holistic, individualized approach, understanding that recovery is not linear.

Keywords: Sexual assault survivors, LGBTQ

1.4: Complex Trauma & Complex PTSD

86/T1.4/P/34: Effectiveness of CBT for Post-traumatic Growth in Individuals with PTSD: A Systematic Review

Authors: Anjor Gadkari, Anupama Gadkari

Contact: anjorgadkari13@gmail.com

Country: India

Abstract: Several studies and reviews focus on the effectiveness of Cognitive Behaviour Therapy (CBT) for improvement of symptoms of Post Traumatic Stress Disorder (PTSD), but there is lesser attention on its role in fostering Post-traumatic Growth (PTG), which is defined by Tedeschi and Calhoun (1999) as positive changes experienced by an individual as a result of struggling with a traumatic event. Post-traumatic growth leads to deepening of relationships,

an increase in compassion and sympathy, and increased ease of expressing their emotions amongst individuals. The aim of this systematic review is to investigate the effectiveness of CBT in increasing post-traumatic growth in individuals diagnosed with PTSD.

The review will be undertaken using PRISMA guidelines to examine the research question which is as follows: Does Cognitive Behaviour Therapy increase post-traumatic growth in individuals with PTSD? The PICO Framework utilized will be as follows: Population: individuals diagnosed with PTSD, Intervention: CBT, Comparator: No treatment and Outcome: Post-traumatic Growth. The review will look at all Randomised Control Trials (RCTs) that have been conducted and published till date, and databases that will be searched include PubMed, MEDline, Cochrane Library, Embase and PsycINFO. Two reviewers will independently examine all studies to ensure they meet the predefined eligibility criteria, and a third reviewer will be consulted at the final stage of study selection. Results will be presented using narrative synthesis along with a meta-analysis if appropriate. Finally, a summary of strengths and limitations of the evidence will also be discussed.

Keywords: Cognitive Behaviour Therapy, Post-traumatic growth, Post Traumatic Stress Disorder

1.5: Abuse-focused CBT for child abuse and maltreatment

101/T1.5/P/42: Literature Review on the idea of School acting as a Protective Factor against Adverse Experiences in Japan

Authors: Yuriko Yanagi

Contact: yurikoanneyanagi@gmail.com

Country:

Abstract: Child abuse has a serious impact on children's mental and physical health, with reports stating that the loss to Japanese society due to child abuse sitting at an estimated 1.6 trillion yen per year (Wada & Igarashi, 2014). Furthermore, in addition to intentional abuse, adverse experiences within the family unit — such as those concerning parental caregiving attitudes and poverty — are also related to children's mental health and problematic behaviors (Hoeve et al., 2009; Pinquart et al., 2017). Therefore, early intervention is necessary to address these adverse experiences.

In 2021, 207,659 cases of child abuse were reported across Japan, with the number of cases continuing to increase. Looking at the abused children by age group, elementary and junior high school students accounted for the largest number (34%), with elementary and junior high school students accounting for 47.8%, indicating the importance of the role played by elementary and junior high schools (Ministry of Health, Labour and Welfare, 2022; Ministry of Health, Labour and Welfare, 2021). Empirical studies have also confirmed that a positive school environment promotes overcoming inappropriate nurturing circumstances while growing up in an inappropriate environment (Khambati, Mahedy, Heron, & Emond, 2018).

Although the above suggests that Japanese schools play a significant role in responding to adversity experiences, findings on adverse experiences in Japanese schools are not well organized. Therefore, the purpose of this paper is to conduct a literature review on the role of Japanese schools in dealing with adverse experiences and to discuss the current challenges and future prospects of adverse experiences in Japanese schools.

Keywords: Maltreatment, ACE, School

1.5: Abuse-focused CBT for child abuse and maltreatment

116/T1.5/P/50: Integrated Trauma Based Intervention in Childhood Dissociative Trance and Possession: A Case Study

Authors: Ms Debaleena Ghosh

Contact: ghosh.debaleena03@gmail.com

Country: India

Abstract: Dissociation is a psychopathological condition that can take many different forms, including depersonalization, trance states, derealization, dissociative amnesia, and dissociative identity disorder. It involves a variety of alterations or changes in the normally integrated mental functions, such as identity, consciousness, or memory. Dissociative Trance is uncommon, particularly in children. The complexity and distinctiveness of the symptoms, causes, and management plan of this condition is indeed challenging. Dissociation is viewed as a response to trauma and a means of separating oneself from the painful scenario and subsequent occurrences. From an etiological standpoint, prior experience with trauma is a significant contributing element to the development of dissociation. The ongoing manifestation of dissociation impairs the person's ability to operate psychologically generally and interferes with their day-to-day activities. Handling dissociative disorders in children frequently requires a combination of family therapy, medication, and individual psychotherapy. Thus, there is a need for an integrated psychotherapeutic approach in order to address the complexities of dissociation in children. The current case study depicts the development of dissociative trance and possession in an 8-year-old child with a history of trauma, along with integrated trauma-based approach in collaboration with behavioural interventions in management of the symptoms.

Aim of the study: The current study aims to demonstrate the application of Trauma-Based Integrative Psychotherapeutic intervention in the management of a case of Childhood Dissociative Trance and Possession, with multiple adverse childhood experiences.

Methodology: The baseline assessments were conducted, the short-term goals of the current intervention were to help the child resume normal daily activities, express emotions followed by regulation of emotions, working on positive parenting with the parents. The long-term goals focused on processing of the trauma, enhancing coping skills to prevent future episodes.

Results: Significant reduction was seen in frequency of dissociative episodes. There was relative improvement in his socio-adaptive functioning. The child reported improved awareness of the activities and techniques that can be used to cope up and ward off distressing thoughts and emotions. Post-intervention assessments were conducted and follow-ups based on OPD basis were continued.

Conclusion: The findings from the case study show that Trauma-Based Integrative Psychotherapeutic interventions for children are effective in treatment of dissociative symptoms in children. Future studies may focus on the efficacy of Trauma-Based interventions in children in dissociative disorders with a larger sample size along with follow-up studies.

Keywords: Dissociative trance, children, trauma, integrative, intervention

1.5: Abuse-focused CBT for child abuse and maltreatment

117/T1.5/P/51: Cognitive behaviour therapy in managing a child with trauma and dissociative symptoms: A case study

Authors: Ms Debalina Das, Amool Ranjan Singh

Contact: d.debalina94@gmail.com

Country: India

Abstract: Here, presenting a case of 9-year-old child who was brought by his parents to the hospital's Outdoor Patient Department (OPD) with symptoms from last four months that included seeing ghost and having talks with them, acting out sexual activities, and being afraid that someone would hurt him. He also refused to make eye contact with strangers. Over time, information about a school teacher's history of bullying and physical abuse was revealed. Management and outcome: Evaluation purpose Child Apperception Test-H, Human Figure Drawing Test, Bender Gestalt Test-II, and Childhood Dissociative Checklist were done. Eleven sessions were conducted, seven of which were with the child and four of which were in conjunction with the caregiver. The average duration was 30-35 mins along with 5-10 mins activity for each session. Psychotherapeutic techniques were tailored utilising cognitive behaviour therapy including psychoeducation, relaxation training, affect modulation, cognitive coping, trauma narration and processing, conjoint sessions, ensuring safety and future development. Result and conclusion: Significant improvement was noted following the treatment. During the initial phase of therapy, an increase in the quality of rapport and disclosure have been noticed though symptoms remain the same but during the second phase of treatment, a decrease in dissociative symptoms was noticed.

Keywords: Child abuse, CBT, Dissociation, Trauma

1.6: Transdiagnostic CBT for trauma and grief

130/T1.6/P/54: Trans-diagnostic CBT in an era of novel classification systems

Authors: Shruti Sinha

Contact: shruti.p.sinha@gmail.com

Country: India

Abstract: As we move from a categorical to a dimensional approach to classifying psychiatric disorders; a similar approach in treatment is desired. This highlights the role of a trans-diagnostic cognitive behavioural therapy (TD CBT) as an individualised treatment.

Aim: To study the effect of combined pharmacotherapy & psychotherapy in line with TD CBT in a case of depression comorbid with PTSD.

Methodology: TD CBT was added as a treatment modality in a patient being treated with SSRI'S for depression. He was additionally diagnosed to have symptoms of PTSD. The subject was undergoing complex bereavement following death of his father due to COVID-19. He was actively involved in not only the caregiving for his father but also witnessed several death

during the course of daily visits to the ICU & wards of the hospital during the first COVID lockdown. His symptoms persisted more than a year following these events resulting in severe avoidance of vocational and personal liability.

Summary: CBT sessions targeted the shared core underlying vulnerabilities across both diagnoses. Cognitive restructuring was the key therapeutic strategy used along with behavioural activation. The dosages of SSRI's were modified as per requirement.

Results: There was an improvement in both co morbidities over the course of treatment leading to not only reduction in flashbacks and feeling of guilt but also an improvement in affect. This was also reflected in the improved functionality on both personal as well as work front.

Conclusion: TD CBT may be a promising modality in treatment beyond borders of specific diagnoses.

Keywords: transdiagnostic CBT, complex bereavement, PTSD, functional improvement

1.5: Abuse-focused CBT for child abuse and maltreatment

138/T1.5/P/58: Role of CBT in PTSD and related distressful life events

Authors: Pragya Mishra, Richa Tripathi, Samant Singh, Manoj Pritviraj M

Contact: pragya.mishra311@gmail.com

Country: India

Abstract: Delusion is a false and unshakable belief that is out of keeping with patients cultural and social backgrounds. A delusion is a belief that a person holds that is not based in a reality and is not altered or modified when the person is presented with contradictory evidence. As such person suffering from delusional disorder struggle to align reality with their perceptions of reality. Similarly in persistent delusional disorder the development either of single delusion or set of delusion persistent and sometime lifelong. They must be present for 3 months. A person with delusional disorder has unsatisfactory or impaired social and personal functioning. They have poor reality contact and start living in a world of imagination, this leads a difficult and stressful life to them. Due to fragmented ego, and poor coping skill depression, anxiety cognitive distortion, and low self-esteem are common in them.

Case Description: The author wishes to discuss the problem of child victim of sexual abuse and post-traumatic stress disorder (PTSD). This is a case of a female child of 14 years old, student of class 10th hailing from urban area of Uttar Pradesh. The child has been sexually abused by her coaching Biology teacher, after that she frequently got blackmailed by him, after some time she left the coaching as she got pregnant, and visited to gynaecologist along with her teacher where she wanted to terminate her pregnancy, but her teacher was misguiding her instead of giving abortion pills she was receiving medication for continue with the conception, after few days when she did not bleed, she doubted and then visited the same gynaecologist alone and requested for termination. As her family members were unaware of it she was handling all these by her own, because of fear she did not told about the mishappening to anyone in her family. Somehow, she manages for one year of her life, during the period of her coping and managing the situation she gradually shows the symptom of short breathing severely and consulted to paediatrician at AIIMS Gorakhpur, where she got diagnosed with Asthma and when she got intervene by the then her parents came to know about her sexual abuse history, from where she referred to department of Psychiatrist for further investigation and treatment. This event

affected her so much that she gradually develops a false and unshakable belief of being followed by the man everywhere she goes and he was demanding a child from her (in whole she use to saw him, and has conversation with him). This leads to social withdrawal, occupational dysfunctions, cognitive distortion, severe level of anxiety and panic attacks, emotional dysregulation and this belief was persistent and unshakable. Even she had believed that the cause of her parents accident on the way to hospital visit with her was he, as he is threatening her if she will not give him child.

Keywords: PTSD, Abuse, Five Grounding Technique

1.11: Traumatic life events, women, and mental illnesses

169/T1.11/P/66: Efficacy of CBT for treatment of PTSD in women

Authors: Achala V Kumar

Contact: achalavkumar@gmail.com

Country: India

Abstract: Women of any age, go through many life transitions, and tremendous changes in hormones in their day-to-day life. When a traumatic life experience is added to it, there could be higher chances of post-traumatic stress.

The traumatic event could be different forms of abuse: physical, emotional, verbal, financial, sexual violence, childhood sexual abuse, intimate partner abuse, molestation, assault by family members, etc.

Traumatic events in a woman's life could bring out consequences like changes in behaviours and symptoms of gastrointestinal issues, severe anxiety, depression, sleeping disorders, nightmares, eating disorders, dissociation, substance abuse, high-risk sexual behaviours, aggression, etc.

Trauma-Focused Cognitive Behavioural Therapy would focus on the symptoms present one by one. CBT psycho-educates about the symptoms, and comorbid health conditions and provides self-control skills to manage them. CBT helps improve functioning by changing patterns of thoughts, behaviours, feelings and actions. Trauma – focused CBT, is a long term therapy, once the session plan is completed, relapse prevention training is provided, and a number of follow up sessions are taken.

There are plenty of trauma-focused psychotherapies, like Present centred therapy (PCT), Trauma-Focused Cognitive Behavioural Therapy (TF-CBT), Cognitive Processing Therapy (CPT), Stress inoculation training (SIT), Prolonged Exposure therapy and response prevention, Eye Movement Desensitization and Reprocessing (EMDR), lastly medications.

While reviewing different studies, articles, research papers, a common emphasis was found, i.e., Trauma-Focused Cognitive Behavioural Therapy would be an effective treatment for PTSD. Prolonged Exposure therapy and EMDR would be like a quick fix but more effective and immune to relapse is through CBT.

The goal of this study is to compare different therapies with trauma-focused CBT in treating PTSD in women; and to highlight the effectiveness of CBT.

It is possible to help women with PTSD out, using trauma-focused CBT as it is found to be most effective through different studies. On this basis, other layers of the same would be unravelled in further research.

Keywords: PTSD, Trauma-Focused Cognitive Behavioural Therapy, Abuse, depression, anxiety, EMDR.

1.11: Traumatic life events, women, and mental illnesses

195/T1.11/P/73: Relationship between traumatic events, suicide risk, and cognitive factors

Authors: Jihee Jang, Gaeun Son, Euntaek Hong, Subin Park

Contact: jangjh0312@korea.ac.kr

Country: South Korea

Abstract: Aims: we aim to comprehensively examine traumatic events and cognitive factors contributing to increased suicide risk. The objective is to emphasize the necessity of evidence-based treatments, such as Cognitive Behavioral Therapy (CBT), in mitigating the risk of suicide that may emerge following experiences of traumatic events.

Methods: A survey was conducted targeting 1,000 citizens within Seoul, South Korea, who had experienced traumatic events directly or indirectly. The online survey assessed psychological, physical, and economic damages, as well as characteristics related to PTSD and psychosocial factors. Scales included the Life Events Checklist for DSM-5 (LEC-5), the International Trauma Questionnaire Korean version (ITQ-K), the Mental Health Screening Tool for Suicide Risk (MHS:S), and the Posttraumatic Cognitions Inventory (PTCI).

Results: There is a tendency for the number of adverse childhood experiences to increase as the risk of suicide rises. In other words, a greater number of adverse childhood experiences is associated with an elevated risk of suicide, with the degree of negative posttraumatic cognitions acting as a partial mediator. In addition, the experience of sudden death of someone in one's proximity, such as suicide, emerges as a moderating variable that accentuates the heightened risk of suicide due to the levels of PTSD and trauma-related thoughts and beliefs.

Conclusions: Adverse childhood experiences or exposure to someone's suicide can induce significant emotional distress in individuals, leading to severe trauma and psychological difficulties. Furthermore, these experiences may contribute to the development of serious conditions such as PTSD and elevated suicidal risk. Given the significance of cognitive factors in these relationships, CBT, which addresses negative and distorted cognitive processes in individuals who have undergone such experiences, may enhance therapeutic effectiveness.

Keywords: traumatic events, suicide risk, posttraumatic cognition

1.4: Complex Trauma & Complex PTSD

208/T1.4/P/79: Self-Concept moderating Complex Trauma in an Indian Population

Authors: Sanjana Nair, Dr. Rituparna Chakraborty

Contact: sanjana2000.nair@gmail.com

Country: India

Abstract: Complex Post Traumatic Stress Disorder (CPTSD) is characterized by disturbances in self-organization (DSO) and has been associated with Adverse Childhood Experiences

(ACEs). This study investigates whether specific aspects of self-concept moderate the relationship between ACEs and CPTSD symptoms.

Methodology: Data from a young adult Indian population was analyzed using regression and moderation analyses. Measures included the International Trauma Questionnaire (ITQ), Adverse Childhood Experiences Questionnaire (ACEQ), and Six-Factor Self-Concept Scale (SFSCS).

Results: ACEs significantly predicted CPTSD symptoms. Specific self-concept aspects, namely, Likeability and Morality, emerged as significant moderators. Other facets were not significant moderators.

Discussion: The findings suggest that positive self-concept, particularly in the domains of Likeability and Morality, may buffer against the negative impact of ACEs on CPTSD symptoms. This implies that those with high ACEs and CPTSD find it challenging to form positive relationships with others, as well as have difficulty looking for virtues within themselves that do not align with an external institution. These findings highlight the importance of fostering positive self-concept development in interventions for individuals with CPTSD.

Keywords: Complex Post Traumatic Stress Disorder (CPTSD), Adverse Childhood Experiences (ACEs), Self-Concept, Mediation

1.5: Abuse-focused CBT for child abuse and maltreatment

210/T1.5/P/80: CBT for Child Abuse & Maltreatment imparted to an adolescent girl: A Case-Study

Authors: Dr. Ruby Gupta

Contact: rubygupta31@gmail.com

Country: India

Abstract: Aim: To enhance Self-Efficacy and instill Cognitive Coping.

Methodology: Sexual abuse has the potential to generate serious emotional consequences for its victims. A vulnerable and self-conscious 17 years old girl sought counselling with the fear of being judged around one and a half years back. As she opens up after getting comfortable, the girl reports a history of sexual abuse from a relative and emotional neglect from father making her doubt her existence and being self-critical. She showed signs of trust issues as well. The goal was to improve the victim's mental health outcomes. For the screening purpose, Childhood Trauma Questionnaire, CTQ (Bernstein & Fink, 1997) was administered. The self-report includes a 28-item test that measures five types of maltreatment-emotional, physical and sexual abuse and emotional and physical neglect. General Self-Efficacy Questionnaire, GSE (Schwarzer & Jerusalem, 1995) and Brief-COPE (Carver, 1997) were administered. The Brief-COPE is a 28 item self-report questionnaire designed to measure effective and ineffective ways to cope with a stressful life event. Coping is defined broadly as an effort used to minimise distress associated with negative life experiences. The General Self-Efficacy Scale is correlated to emotion, optimism, work satisfaction. Negative coefficients were found for depression, stress, health complaints, burnout, and anxiety.

Summary of Results: It was hypothesised that sexual abuse and neglect were negatively related to general self-efficacy, and general self-efficacy was positively related to active coping, while

there was a negative relationship between abuse & neglect and coping. Pre-post analysis of Cognitive Behaviour Therapy with the dependent variables was done while using Correlation and t-test.

Conclusion: The analyses supported the hypotheses and established the efficacy of CBT as intervention with various set goals. Not just the statistical results revealed a significant difference, there were other indicators as well. CBT emerges as an efficacious technique.

Keywords: Sexual Abuse, General Self-Efficacy, Cognitive Coping

1.3: CBT for recurrent pregnancy loss

223/T1.3/P/85: CBT and Recurrent Pregnancy Loss: Current Trends

Authors: Zaina Asad

Contact: zainaasad86@gmail.com

Country: India

Abstract: The concept of pregnancy loss in India is something which is either downplayed or kept hidden in the shadows. The psychological aspects attached to pregnancy loss and the consequences which follow such a huge loss can have long lasting detrimental impacts on a woman's mental health. As of now, there have been constant research on the biological aspects of pregnancy loss, why it happens, how it happens etc, but not many on the after effects of the loss. Consequently, very little is known about the interventions to address the psychological consequences of an unsuccessful pregnancy. CBT has shown to be promising in patients with PTSD and other anxiety and mood related disorders, hence the concept of using CBT to address the issues faced by women who have experienced pregnancy loss is a logical step. This descriptive literature review is aimed at exploring: 1) The psychological needs of women with recurrent pregnancy loss 2) The effectiveness of CBT on women who have experienced pregnancy loss. This review paper is a compilation of relevant literature obtained from online databases and articles from prominent journals to obtain a comprehensive understanding of the psychological needs and consequences experienced by women who have miscarriages and the effectiveness of CBT on mental health issues which arise because of it. This review emphasised on the importance of providing the required and relevant mental health support that many women, who have gone through a miscarriage may need. It also showed the promising effects of CBT in women experiencing psychological distress due to recurrent pregnancy loss. The paper also shows scope for further empirical research to test the findings of the effectiveness of CBT and also adds to the need to encourage gynaecologists and obstetricians to conduct psychological screening and encourage referrals to mental health professionals when needed.

Keywords: recurrent pregnancy loss; mental health; CBT; gynaecology

1.10: Trauma-informed interventions

238/T1.10/P/91: Moral injury and trauma are complex psychological phenomena

Authors: Ojore Solomon Akwue

Contact: revsoloakwue@gmail.com

Country: United States

Abstract: Moral injury and trauma are complex psychological phenomena that can deeply impact an individual's well-being. Navigating through these challenges requires a holistic approach that incorporates self-care, cognitive-behavioural therapy (CBT), personal strength, and spiritual resilience. In this discussion, we will explore how these four elements can work synergistically to promote healing and growth.

Self-Care: Self-care plays a crucial role in mitigating the effects of moral injury and trauma. According to Herman (1992), survivors of trauma often struggle with a sense of disconnection from their bodies, and self-care serves to reestablish that connection. Engaging in activities that promote physical, emotional, and mental well-being, such as exercise, mindfulness, and healthy relationships, can be integral to the recovery process (Najavits, 2002).

Cognitive-Behavioral Therapy (CBT): CBT is a widely recognized therapeutic approach for addressing trauma-related issues. This evidence-based method helps individuals identify and challenge negative thought patterns and behaviors. By working with a trained therapist, survivors of moral injury can reframe their cognitive processes and develop healthier coping mechanisms (Resick et al., 2008). CBT empowers individuals to take control of their reactions to traumatic experiences, fostering resilience and a sense of agency.

Personal Strength: Cultivating personal strength involves tapping into one's inherent resilience and capacities. According to Tedeschi and Calhoun (2004), individuals can experience post-traumatic growth by discovering new strengths and perspectives in the aftermath of trauma. Encouraging survivors to recognize their own resilience and strengths can contribute significantly to their healing journey.

Spiritual Resilience: Spirituality can be a profound source of strength in navigating moral injury and trauma. Spiritual resilience involves finding meaning and purpose in one's experiences, which can contribute to a sense of coherence and integration (Koenig, 2012). Incorporating spiritual practices, whether through organized religion, meditation, or nature connection, can provide a framework for understanding and transcending the challenges posed by moral injury.

Conclusion: In conclusion, navigating moral injury and trauma requires a multifaceted approach that integrates self-care, cognitive-behavioral therapy, personal strength, and spiritual resilience. Each element contributes uniquely to the healing process, addressing different aspects of the individual's well-being. By recognizing the interconnectedness of these components, individuals can develop a comprehensive strategy for overcoming the profound impacts of moral injury and trauma.

Keywords: Moral injury, trauma, complex psychological phenomena

1.1: CBT for disaster trauma

239/T1.1/P/92: Navigating the complex terrain of moral injury and trauma

Authors: Ojore Solomon Akwue

Contact: revsoloakwue@gmail.com

Country: United States

Abstract: Navigating the complex terrain of moral injury and trauma demands a comprehensive human approach, acknowledging the intricate interplay between self-care, cognitive-behavioral therapy (CBT), personal strength, and spiritual resilience. In this exploration, we delve into the multifaceted dimensions of these components, recognizing their collective significance in fostering healing and restoring well-being. Self-care emerges as a foundational pillar in the journey toward healing from moral injury and trauma. It encapsulates a spectrum of intentional activities and practices aimed at nurturing one's physical, emotional, and psychological health. By prioritizing self-care, individuals initiate a process of self-restoration, fostering resilience in the face of moral adversity (Smith et al., 2018). This emphasis on self-care aligns with contemporary therapeutic paradigms that highlight the interconnectedness of mind, body, and spirit in the healing process (Harris, 2020).

Complementing self-care, cognitive-behavioral therapy (CBT) offers a structured framework for addressing the cognitive distortions and negative behavioral patterns associated with moral injury and trauma (Resick et al., 2017). CBT equips individuals with practical tools to reframe maladaptive thought processes, promoting adaptive coping mechanisms and emotional regulation. The integration of CBT into the holistic approach underscores the importance of addressing both the psychological and behavioral facets of moral injury for comprehensive healing (Nash et al., 2019). Personal strength emerges as a dynamic force within the healing process, representing an individual's capacity to endure, adapt, and grow in the aftermath of moral injury (Litz et al., 2009). Cultivating personal strength involves empowering individuals to find meaning and purpose amidst the challenges posed by moral adversity. The acknowledgment of personal strength within the holistic approach reflects a resilience-oriented perspective, emphasizing the transformative potential inherent in navigating moral injury and trauma (Bonanno, 2004).

Spiritual resilience constitutes a vital dimension of the holistic approach, recognizing the impact of moral injury on one's spiritual well-being (Currier et al., 2018). Addressing the existential and moral dimensions of trauma, spiritual resilience encompasses the restoration of faith, the search for meaning, and the cultivation of a sense of interconnectedness. Integrating spiritual resilience into the healing process acknowledges the diversity of individuals' belief systems and the role of spirituality in fostering post-traumatic growth (Bryant-Davis et al., 2017). This holistic approach to navigating moral injury and trauma emphasizes the synergy among self-care, CBT, personal strength, and spiritual resilience. By intertwining these components, individuals embark on a transformative journey toward recovery and post-traumatic growth. Recognizing the individualized nature of healing, this approach provides a flexible framework that can be tailored to accommodate diverse cultural, religious, and personal perspectives.

In conclusion, the holistic approach to navigating moral injury and trauma underscores the interconnectedness of self-care, cognitive-behavioral therapy, personal strength, and spiritual resilience. This integrative framework offers a nuanced understanding of the complex dynamics at play in the aftermath of moral adversity, providing a roadmap for individuals to embark on a transformative journey toward healing and well-being.

Keywords: Moral Injury, Trauma

1.10: Trauma-informed interventions

257/T1.10/P/100: CBT Interventions for Trauma Symptoms in Psychosis: A Systematic Review

Authors: Preeti Kodancha, Akanksh Sharma, Akanksh Sharma

Contact: preetikodancha.psych@gmail.com

Country: India

Abstract: Traumatic events have been known to precipitate the onset of various psychiatric disorders like depression, posttraumatic stress disorder and substance use disorders. Psychotic disorders, which have primarily been associated with genetic or biological etiologies, have been relatively understudied in the field of trauma research. Compelling evidence from meta-analyses and case-control studies has identified the link between the experience of traumatic events and increased risk of developing psychotic illnesses. Cognitive Behavioral Therapy (CBT) has been found to be effective in treating trauma sequelae and is the first line of treatment in managing post-traumatic symptoms. However, the role of CBT in the management of psychotic symptoms associated with trauma history remains unclear. The current systematic review aims to examine CBT interventions for treating trauma symptoms in psychotic disorders and highlight the prevailing trends in psychotherapy.

Materials and Methods: To find appropriate studies, a thorough search of 25 years literature was conducted with electronic search engine databases e.g., PubMed, Educational Resources Information Clearinghouse (ERIC), PsycINFO, SCOPUS, ProQuest, EBSCO, and Google Scholar. Studies published in peer reviewed English language journals were included. Unpublished material and non-peer reviewed materials were not included as a part of this review.

Results: The findings from the review suggest CBT as a standard and useful treatment modality for the management of trauma in psychosis.

Conclusion: CBT proved as effective treatment modality to ameliorate symptoms associated with trauma in psychosis.

Keywords: Psychosis, cognitive behaviour therapy, effectiveness, trauma

1.7: Transdiagnostic CBT for PTSD in adolescents and adults

283/T1.7/P/115: Exploring the Effectiveness of Transdiagnostic CBT for PTSD in Adolescents and Adults: A Systematic Literature Review

Authors: Piyush Aggarwal, Dr. Anviti Gupta

Contact: piyush.agg20@gmail.com

Country: India

Abstract: Post-Traumatic Stress Disorder (PTSD) is a debilitating mental health condition that impacts individuals of all ages. The effectiveness of Cognitive Behavioral Therapy (CBT) in treating PTSD symptoms is well-recognized, with Transdiagnostic CBT emerging as a promising approach that targets comorbidities and shared psychological mechanisms. This systematic literature review aims to evaluate the efficacy of Transdiagnostic CBT for PTSD in both adolescents and adults, synthesizing existing research and highlighting key factors contributing to its success.

Background: PTSD is characterized by diverse and complex underlying factors, making its treatment challenging. The transdiagnostic approach, which addresses common psychological processes across different disorders, has gained attention in recent research. This review uses a systematic methodology to collate and analyze studies focusing on the transdiagnostic treatment of PTSD, evaluating its effectiveness across various age groups.

Methodology: A thorough literature search was conducted, focusing on studies that investigated the use of Transdiagnostic CBT for PTSD in adolescents and adults. The review includes qualitative and quantitative research, meta-analyses, and clinical trials. The collected data is synthesized to assess the overall effectiveness of Transdiagnostic CBT, considering mediating and moderating factors that influence treatment outcomes.

Results: The systematic review identified a consistent pattern of positive outcomes associated with Transdiagnostic CBT in treating PTSD. The therapy was effective across different age groups, with certain mediating factors enhancing its efficacy. Moderating factors such as age, comorbidities, and treatment duration also played a significant role in determining the success of the therapy.

Conclusion: This systematic literature review underscores the potential of Transdiagnostic CBT as an effective treatment for PTSD in adolescents and adults. The findings highlight the importance of considering various mediating and moderating factors in the implementation of CBT interventions. This review contributes to the growing body of literature on PTSD treatments, emphasizing the need for adaptable therapeutic approaches to accommodate the diverse requirements of different age groups in PTSD therapy.

Keywords: PTSD, Transdiagnostic CBT, Structural Equation Modeling, Effectiveness, Mediating Factors, Moderating Factors, Adolescents, Adults, Mental Health, Cognitive Behavioral Therapy, Treatment Outcomes

VIRTUAL PRESENTATIONS

1.15: Others

285/T.15/VP/12: Examining Post-traumatic growth in urban Indian substance users

Authors: Samridhi Pahalwan, Dr. Gitanjali Narayanan, Dr. Jayant Mahadevan

Contact: spahalwan27@gmail.com

Country: India

Abstract: Background/Objectives: Substantial literature is available to illustrate the role exposure to traumatic events can have on the severity and prognosis of substance use disorders. However, research exploring the possibility of a positive transformation in this population has been sparse. Especially, looking at post-traumatic growth. We aimed to examine post-traumatic growth in urban Indian adults with substance use disorders.

Methods: Data was collected from patients seeking treatment from a tertiary care centre in Bangalore, India. Data was analysed using descriptive and correlational analysis. The sample predominantly consisted of single males, Hindus, educated up to graduation, from a nuclear, urban middle-class background.

Results: The findings showed the presence of significant trauma history but also showed high levels of post-traumatic growth. Hence, this indicating that despite the presence of significant trauma, there is a possibility of a positive transformation in the individual.

Conclusions: These findings highlight the role of personal and social strengths in individuals with substance use disorders.

Keywords: Substance use disorders, Post-traumatic Growth, Urban India

2.1: CBT for Child & Adolescent issues

288/T.15/VP/13: A randomized control trial of effectiveness of group cognitive behavioral therapy on depression, negative automatic thoughts, anxiety, self-esteem, and anger among adolescents in shelters

Authors: Dr. Wai-Eng Ding, Dr. Hj. Firdaus Mukhtar, Prof. Dato' Lye Munn Sann, Dr. Hamidin Awang

Contact: dingcpsy@gmail.com

Country: Malaysia

Abstract: Literature on adolescents from sheltered homes in Malaysia is scarce. This randomized controlled trial aimed to determine the effectiveness of group cognitive behavioural therapy (gCBT) known as the SAHABAT program versus a waitlist control on various psychological factors among orphaned adolescents in Malaysian sheltered homes. The study involved nine sheltered homes, with the SAHABAT group consisting of 4 homes (n = 71 adolescents) and the waitlist control group comprising 5 homes (n = 68 adolescents). The intervention group attended 8 sessions of the SAHABAT programme over one month. Data were collected at six time points: pre-intervention, mid-intervention, immediate post-intervention, and at 1-month, 3-month, and 6-month intervals after the intervention. In this

study, we employed a generalized linear multi-modelling statistical analysis within the context of multi-stage cluster sampling.

Results revealed significant and varying effects over time. The SAHABAT program showed superiority over the waitlist control in reducing depression, anxiety, negative automatic thoughts, and anger, with effect sizes ranging from small to moderate. Moreover, only the SAHABAT group exhibited a significant reduction in these factors from pre-intervention to 6 month post-intervention. In contrast, the SAHABAT program was notably more effective in enhancing self-esteem compared to the waitlist control, with a significant increase observed over time, supported by a moderate effect size. The reductions in depression, anxiety, negative automatic thoughts, and anger were mostly mild to minimal, while the increase in self-esteem was notable.

In conclusion, the SAHABAT program proved effective in alleviating symptoms of depression, anxiety, NAT, and anger, and promoting self-esteem throughout the study. These findings have significant implications for the treatment of mental health issues among adolescents, particularly those in sheltered homes, and can inform national policies to better address the needs of this vulnerable population.

Keywords: Adolescents, anxiety, depression, group cognitive behavioural therapy, negative automatic thoughts, self-esteem

1.15: Others

300/T.15/VP/14: A Comparative Study on Neuro-Cognitive Functioning of Schizophrenia, First degree Relative and Healthy Control

Authors: Santona Panda, Dr Jashobanta Mahapatra

Contact: santonapanda11@gmail.com

Country: India

Abstract: Neurocognitive deficits for a long have been well documented as a part of the Schizophrenia disease process. But First-degree relatives who are not psychotic who have schizophrenia on average have 50% of the same genes but are usually unaffected by psychotic confounds (such as positive symptoms and medication that may impair cognition). As a result, families offer a special demographic to research genetic risk for schizophrenia across the course of a person's life. There still remains an air of ambivalence on the magnitude of change expected.

Further within the schizophrenia group, it is largely hypothesized that more than positive symptoms negative symptoms lead to a greater cognitive impairment owing to the mesolimbic and mesocortical pathways.

Methodology: This study proceeds with the objective of comparing the differences to be remarked amongst three groups namely the Schizophrenia (SC) group, First Degree Relative (FDR) group and Healthy Control (HC) group on certain Neurocognitive Domain. 30 participants are employed in each group and are administered the Wisconsin Card Sorting Test (M- WCST), Trail Making Test (TMT (A, B)), and Bender Gestalt Visuo-Motor Test (BGVMT).

Results: Kruskal Wallis H test was employed to compare the 3 groups and post Hoc (LSD) was used to see the difference among the groups. Mann Whitney U was run to find the difference between the Positive Symptom and the Negative symptom group.

Conclusion: The Schizophrenia group had the worst performance and significantly differed at all levels except in the percentage of Perseverative Error. There was no significant difference between FDR and HC groups' performance on the tests. Similarly, no significant difference was marked in neurocognitive performances amongst positive symptom and negative symptom groups.

Keywords: Schizophrenia, FDR, M-WCST, TMT (A, B), BGVMT



ACBTA 2024 NEW DELHI SCIENTIFIC PROGRAM

TRACK 2

CBT FOR MENTAL DISORDERS AND SPECIFIC ILLNESSES

(29 FEBRUARY 2024: DAY 2)



TRACK 2

CBT FOR MENTAL DISORDERS AND SPECIFIC ILLNESSES (29TH FEBRUARY 2024: DAY 2)

OPEN SYMPOSIA

2.1: CBT for Child & Adolescent Issues

10/T2.1/S/2: Creative Adaptation of CBT for Children at Risk: Possibilities and Challenges.

Authors: Sonia Puar, Rashmi Pandey, and Dr. Reema Gupta

Contact: spuar@amity.edu

Country: India

Abstract: Children at risk are those who have an experience of intense and chronic risk factors in their personal, environmental, and relational domains, that prevent them from achieving their capabilities and elevate the risk of serious mental health problems. Play is acknowledged to be a key factor in the natural development of children. Play is the singular central activity of childhood that is always occurring in all places. Play can be considered a medium of exchange and restricting children to only verbal expression can create a barrier to effective communication and resolution of childhood issues. Cognitive-Behavioural interventions help children with mental health problems at various developmental stages from preschool through adolescence. Historically, cognitive behavioural therapy (CBT) has been used to address difficulties in children. Play-based Cognitive-behavioural interventions use play in making cognitive changes. It introduces children to different, more adaptive responses to their difficulties, which are then used as models utilizing developmentally appropriate tools. A child CBT therapist may quite often use play in sessions, but very rarely will they be “just” playing. They may be practising new skills, gathering evidence, testing out negative predictions, and having fun at the same time. Play can be used to teach children important CBT concepts when used with CBT principles. Play-based CBT incorporates structured, goal-oriented activities and unstructured, child-directed therapeutic play. The therapist helps them to make connections between their thoughts, feelings, and behaviours through play. In this approach, the therapist might create scenes from the child’s life, and use role-play games and desensitization techniques to provide developmentally appropriate care.

The current Symposium will focus on highlighting the psychosocial needs of the vulnerable population of children at risk. It will discuss how creatively adapted play-based cognitive behavioural therapy can be used with children. And it will also elaborate on the status of research in such adaptations of CBT.

Keywords: Children-at-Risk, CBT, Play Based CBT

2.10: Transdiagnostic CBT for co-morbid illnesses

7/T2.10/S/1: Re-envisioning Rumination: A Transdiagnostic Approach

Authors: Anindita Ghosh, Sampurna Chakraborty, Sneha Das

Contact: aninditaghosh257@gmail.com

Country: India

Abstract: Background: Rumination, regarded as a perseverative cognitive construct, tends to telescope the attentional field of an individual towards a narrow range of experience, with partial or complete exclusion of other material from accessibility. Various neurobiological processes are involved as underlying mechanisms of rumination in tandem with their psychological afferents, involving different cortical and sub-cortical regions. In recent years, many transdiagnostic approaches have been considered, leading to the understanding of rumination as a non-pathological construct. However, the process can soon shape up as unconstructive when ruminations are based on evaluative aspects of oneself or significant personal experiences.

Description of the Symposium: Presenting different pictures across different disorders with varying neural mechanisms, the focus on rumination has increased over time to present a unified connection. The present work focuses on proposing an eclectic idea based on trans-theoretical formulation, aiming to outline suggested underlying mechanisms of the phenomenon across various psychiatric disorders. It aims to highlight the personal experiences and appraisals of rumination in an individual across different spectrums of cognitive and meta-cognitive functions. It also aims to demonstrate different clinical cases involving rumination as a core component, viz., Depression, Obsessive Compulsive Disorder, and Dissociation, and to incorporate meaningful conceptualizations to promote an extensive understanding. Lastly, it encompasses a discussion of the novel as well as evidenced based techniques of treatment, paving the way to identify pertinent areas for future empirical research, inclusive of comprehensive and tailored interventions targeted at rumination across clinical conditions.

Keywords: Rumination, Transdiagnostic, CBT, Depression, Dissociation, OCD, personality disorders

2.15: Others

16/T2.15/S/4: Integration of CBT in Treatment of Psychosis - Indian Experience, Challenges and Innovations

Authors: Vivek Kirpekar, Anupama Gadkari, Mona Sharma, Sunila Dingankar

Contact: anupamavandan@rediffmail.com

Country: India

Abstract: CBT module for psychosis CT-R is seen to be useful in psychosis symptom reduction, rehabilitation and in decreasing burden of disease. In post pandemic times there is significant surge in psychosis. India being developing country with limited resources and huge diverse population needs to use integrated and team approach for use of CBT. The CT-R model gives effective techniques to deal with different issues/ symptoms of psychosis at different

stages of illness and for training family and care givers . Here we have put together neurocognitive evidence , The CT-R module and real time experiences and insights.

Keywords: CBT , CT-R , Indian Experience , psychiatrist's training

2.15: Others

26/T2.15/S/5: Exploring ADULT ADHD: Phenomenology, Psychopathology, and Psychotherapy

Authors: Shreya Bhattacharya, Sneha Das, Sampurna Chakraborty.

Contact: shreya.kolkata.94@gmail.com

Country: India

Abstract: Background: Attention Deficit Hyperactivity Disorder (ADHD) is marked by a persistent deficiency in attention, coupled with hyperactivity and impulsivity, stemming from a complex neurobiological foundation. Its onset typically occurs in childhood, impacting academic performance and interpersonal relationships, influencing an individual's overall well-being. While it was initially believed to diminish with the progression into adolescence and young adulthood, recent research has unveiled the continued existence of these symptoms in adults, contributing to widespread underdiagnosis. Within the realm of adult ADHD, there are frequent reports of concurrent symptoms of anxiety and depression, which can obscure the recognition of the disorder in adults. This underdiagnosis can have significant repercussions, as ADHD in adults profoundly influences one's overall self-perception and well-being, making them susceptible to secondary challenges such as difficulties in relationships, a sense of purposelessness, substance use, and self-harm. Therefore, the impact of ADHD on adult life is evident in the substantial reduction of psychosocial efficiency.

Description of the Symposium: In this symposium, our objective is to broaden and deepen our comprehension of Adult ADHD, thereby dispelling the ambiguity surrounding its diagnosis and presentation. Beyond achieving precise diagnoses, we are attempting to unravel the subtleties of sub-threshold manifestations of the disorder. The current focus of our work revolves around elucidating the phenomenology and psychopathology of ADHD in the adult population through clinical case presentations. This exploration aims to not only delineate the impacts of inattention and hyperactivity-impulsivity but also to identify key personality markers within this demographic. These markers often contribute to the diagnostic challenges, as they can overlap with various other conditions, including personality disorders, leading to underdiagnosis. We will extensively discuss the clinical profiles of approximately six adults who exhibited symptoms of ADHD and subsequently received a confirmed diagnosis. By the symposium's conclusion, our goal is to delve into various therapeutic techniques designed to alleviate symptoms. These interventions are designed to improve attention, planning, organization, and prioritization while also addressing the enduring emotional distress, self-related challenges, and interpersonal inefficiencies consistently experienced by adults with ADHD.

Keywords: Adult ADHD, phenomenology, clinical profiles, psychotherapy

2.3: Advances in the treatment of mood disorders and suicidal behavior

48/T2.3/S/6: Dialectical Behavior Therapy on Non-Suicidal Self-Injury Behavior: Effectiveness and Mechanisms

Authors: Chun Wang, Ning Zhang, Zhengyi Li, Nan Lang, Zixin Chen, Pengyu Du

Contact: chun_wang@njmu.edu.cn

Country: China

Abstract: Non-suicidal self-injury (NSSI) is defined as the direct and deliberate destruction of one's body tissue without suicidal intent. Dialectical behavior therapy (DBT) has been proven to be effective in improving NSSI. However, it remains unclear how it works. To further explore the effect in China and the effective mechanism of DBT, we conducted a multicenter study with 14 hospitals in China. In this symposium, four researchers will jointly introduce their research achievements from clinical practice and scientific research perspectives in the past three years.

In the first presentation, Zhengyi Li will report on the effectiveness of DBT for NSSI. The study analyzes efficacy after 13 weeks of DBT for NSSI and long-term efficacy at one-year follow-up.

Then, the second presenter, Nan Lang will describe the role of DBT treatment on cognitive mood dysregulation in patients with NSSI. DBT has an impact on the cognitive control function of emotional conflict in NSSI patients. Cognitive functioning in NSSI was analyzed from multiple perspectives using cognitive tasks and fMRI techniques using data collected from a number of hospitals across the country.

After this, Zixin Chen will report on gut microbiome changes post-DBT in patients with depression with NSSI, discussing the role of the gut-brain axis in psychotherapy and the effect and mechanism of DBT in gut microbiota.

The final presentation, Pengyu Du, will cover a genetic topic: epigenetic mechanisms of NSSI. According to previous studies of our research group, the effect of psychotherapy may be related to epigenetic changes in patients. Multiple target region methylation enrichment sequencing technology was used to conduct a randomized controlled study, and target gene site methylation was sequenced before and after treatment. It is pointed out that the reason of DBT's effectiveness in treating NSSI is related to the change of specific gene methylation in patients.

Keywords: Non-suicidal Self-injury, Dialectical Behavior Therapy, Randomized Controlled Trial, Gut Microbiome, Cognitive, fMRI

2.1: CBT for Child & Adolescent issues

76/T2.1/S/9: Symposium on Parent Mediated Low-Intensity CBT Intervention for Autism-spectrum disorders: Research and Practice

Authors: Dr. Renu Sharma, Dr. Sujata Satapathy, Dr. Rajesh Sagar, Rachana Maurya, Usha Devi, Mansi Chadha, Vidhi Khanna

Contact: agastyarenu@yahoo.com

Country: India

Abstract: Parent-mediated low-intensity CBT interventions are technique-focused where the parent is the agent of change and the child is the direct beneficiary of treatment. Parent-mediated CBT interventions focus on the treatment of core features of ASD or maladaptive behaviors. The efficacy of CBT-based parent training in treating disruptive behaviors in children from pre-school to adolescence is supported by decades of research and is used effectively. These programs represent a structured intervention format and treatment targets, including language skills, social and emotional skills, psychoeducation, and treatment of disruptive behaviors.

Keywords: Autism spectrum disorders, treating ASD children, Parent training program, low-intensity CBT based parent training, Therapist- assisted, Parent mediated Interventions.

2.7: CBT for chronic and specific medical conditions

120/T2.7/S/13: Integrating Acceptance and Commitment Therapy with Cognitive Behavioural Interventions in Management of Chronic Medical Conditions

Authors: Shinjini Samajdar, Chilka Mukherjee, Saranya Banerjee, Dr. Susmita Halder

Contact: shinjini.samajdar@gmail.com

Country: India

Abstract: Introduction: Acceptance and Commitment Therapy (ACT) is a well-established psychotherapy approach that offers promise in addressing a wide range of physical and mental health conditions. ACT is grounded in the belief that life inherently includes experiences of pain, illness, anxiety, and distress, and it aims to enhance psychological flexibility to enable individuals to adapt constructively to these challenges. In this symposium, we aimed to explore the application of ACT in the management of three diverse health conditions: diabetes, polycystic ovary syndrome (PCOS), and chronic headaches. Each condition presents unique psychosocial challenges, and the objective is to examine the efficacy of individualized ACT interventions tailored to these specific health issues. Methods: Individualized ACT interventions were applied, and quantitative and qualitative assessments were utilized to gain a nuanced understanding of patient experiences. In the case of diabetes, participants were educated in ACT concepts such as acceptance, commitment, and mindfulness, focusing on improving self-management behaviors and coping strategies. For PCOS, women experienced complex psychosocial distress, and the intervention involved addressing stress, anxiety, depression, and body image concerns within an individualized framework. Additionally, for chronic headaches, cognitive-behavioral therapy and third-wave behavior therapies were employed to reduce headache frequency and intensity while enhancing overall psychosocial functioning. Results: Highlighting the potential of individualized ACT interventions in improving the management of diabetes, PCOS, and chronic headaches. Conclusion: The findings presented in this symposium emphasize the potential of individualized ACT as an effective intervention for medical conditions. These results collectively demonstrate the versatility and effectiveness of ACT in enhancing the well-being of individuals facing a diverse range of health challenges.

Keywords: Acceptance and Commitment Therapy, ACT, Cognitive Behavioral Therapy, Medical Conditions, Diabetes, Polycystic Ovary Syndrome (PCOS), Chronic Headaches

2.1: CBT for Child & Adolescent issues

123/T2.1/S/14: Parents-mediated Intervention for children with ADHD: Designing & Implementing

Authors: Prof. (Dr.) Sujata Satapathy, Vidhi Khanna, Mansi Chadha, Rachana Maurya and Usha Devi

Contact: adhdnationalupdate2022@gmail.com

Country: India

Abstract: Introduction to Parents' Support vs Parents' Mediated Interventions for Children with ADHD: This presentation will focus on Bearss et al.'s (2015) model taxonomy of parents training (PT) with two broad categories of PT, parent support and parents' mediated interventions (PMIs). These two are distinguished by the intent of the program and the agent of change. PMIs are designed to actively engage the parent to aid in skill acquisition or behavior change in the child.

PMIs are reported to be cost-effective for addressing the needs of children with various neurodevelopmental disorders (NDDs) in developed countries. However, a very limited number (N=4) of PMIs are reported in South Asia including 2 in India. The presentation also discusses the details of reported PMIs, methodological issues and gaps in implementing these. Also, benefits in the area of core symptoms and non-core symptoms will be discussed.

Designing a Parents-mediated intervention for children with ADHD: Key methodological features & Psychoeducation module: The methodology of originally developed PMIs and adapted PMIs are different. Culture-specific adaptation parameters is key to adaptation. Again pre and post-assessment tools for core and non-core symptoms and feasibility testing parameters play important roles. The existence of a structured written manual is very crucial in designing or adapting a PMI for Indian children. The psychoeducation module is very important in the whole PMI. This presentation will discuss all methodological issues in designing PMIs for children with ADHD.

Attention, Cognitive Deficits, and Academic Performance Module: This presentation focuses on core neurocognitive symptoms in Indian children with ADHD. While designing parents' implemented neurocognitive tasks, the daily dosage of tasks has to be clearly mentioned. Parents should also be supported with well-structured specific modules to follow and strengthen. Currently reported PMIs for ADHD are limited in many ways including lack of structured tasks with dosage and enhancing difficulty level. This presentation will discuss many such issues and guidelines pertaining to core neurocognitive deficits in children with ADHD.

Impulsivity and Hyperactivity: Behaviour-focused Module: Behavioural management including core symptoms of impulsivity and hyperactivity is extremely important in parents training. Monitoring each technique weekly and addressing difficulties is a core component of this session. Discussion on direct intervention with children as a supplementary component of this module will be elaborated. Assessment of symptoms and digital methods of doing it will also be discussed in this session.

Socio-emotional and Parents' mental health Module: The majority of PMIs don't include any content of parents' mental health although having a child with any neurodevelopmental disorder has tremendous mental health impacts on the family. Various issues will be discussed

on the structured assessment and intervention aspects of parent's mental health. De-learning and Relearning and practicing new ways of expression of emotions is key component of this module. Specific tasks related to socio-emotional issues in children and parents will also be discussed. Caregiver burden and parents' relationship are also a part of this module.

Keywords: Parents-mediated Intervention, Children with ADHD, Parent having children with ADHD, Psychoeducation module, Attention, Cognitive Deficits, Academic Issues, Impulsivity and Hyperactivity

2.4: CBT for Women & Reproductive Health

154/T2.4/S/19: Mindfulness-Based Cognitive Therapy (MBCT) for Female Psycho-Sexual Dysfunction

Authors: Dr. Prasanta Kumar Roy, Dr. Doyel Ghosh, Ms. Shruti Puri

Contact: prasanta.roy@gmail.com

Country: India

Abstract: Background: Worldwide evidence suggests that above 40% of the females are having some sort of sexual difficulty and in India female sexual dysfunction (FSD) can be as high as 55% for fertile women. Despite high prevalence help seeking for FSD is rare mostly due to many psychosocial complexities and belief system related to sexuality. Moreover, there is a lack of culture sensitive psychotherapy modules for this population.

Description: The symposium will highlight upon the research evidences related to FSD and it's psychological management. A Mindfulness Based Cognitive Therapy module for FSD that is developed by the presenters will be introduced. Finally, practical application of the developed module on females with sexual dysfunction will be discussed with case examples following a case study method.

Keywords: MBCT, Female sexual dysfunction, sexual pain

2.14: CBT for suicide and Postvention services

201/T2.14/S/23: Low-intensity (LI) Digital CBT for Suicide Risk Prevention Among Paramilitary Forces of India

Authors: Mandeep Kaur, Dharaa Gupta, Rekha Patel, Pratap Sharan

Contact: bsfaiims2023@gmail.com

Country: India

Abstract: Abstract 1: This presentation will focus on exploring and reviewing the critical theme of Risks and Vulnerabilities in Paramilitary staff. By fostering a collective understanding, we seek to empower mental health professionals with insights necessary to devise tailored interventions for the mental health risk reduction and well-being of Paramilitary staff. This review aims to provide a consolidated view of the existing literature of the impact of work-related stressors, the impact of serious interpersonal conflicts (personal and professional), and trauma exposure, on mental health.

Abstract 2: Present LI digital CBT is designed for targeting specific paramilitary forces who are at risk of suicide. The objective was to assess suicide-related parameters such as interpersonal conflicts, depression, anxiety, substance addiction or dependence, and sleep disturbances and provide individual psychotherapy to reduce the risk. To cater to the mental health of paramilitary forces, three helpline mobile numbers were circulated in all units of specific paramilitary force. The people who contacted and sought help, intake and essential assessments were taken from them telephonically and with the help of Google Forms. The screening procedure comprised of a list of self-reported presenting complaints and validated tools like Assessment of Suicide Risk (ASQ), Hospital Anxiety and Depression Scale (HADS), and CAGE. Once the people at risk are identified, an individualized intervention structure is formulated targeting the chief complaints with the use of psychoeducation, specific complaints-tailored assessments, and required worksheets. This low-intensity digital CBT for individual therapy is designed for 6-10 sessions, dedicating 30-45 minutes per session, individual psychotherapy sessions were delivered through secured video-telephonic communication portals.

Abstract 3: A total number of 180 calls (normal and WhatsApp calls) were received from June-October 2023. Brief explanation about the purpose and delivery method of the service and confidentiality rules was provided to all. Intake form with the consent was received by those who voluntarily opted for self-assessment. As per the findings of the initial intake and essential self-assessment, therapy was initiated for 30 people out of which 10 were high risk cases. Mid-therapy feedback as well as termination feedback was taken as an objective indicator of the effectiveness of CBT. People who were at high risk for suicide on the suicide screening scale were followed up monthly after therapy termination.

Abstract 4: The research evidence for low-intensity cognitive behavioural therapy (LI-CBT) is witnessing increased reporting recently. The advantages such less brief versions of individual therapies and shorter duration of sessions, low-cost, interventions supported by self-help materials or internet-based platforms, easier to integrate into primary and community health care settings, hence seems a promising approach of care. The change from traditional approach of CBT to LI-CBT and that too on digital platform thus, can increase the access to mental health interventions for larger numbers of people in need of mental health care. Despite developments in mental health services for armed forces in many countries, acceptability and delivery of service provision remain as key barriers to access. A LI-CBT session structured between 6-10 sessions delivered through digital platform proved promising. The mixed communication method.

Keywords: LI-CBT, Suicide Risk Reduction, Paramilitary force

2.7: CBT for chronic and specific medical conditions

215/T2.7/S/25: Current and Future Perspectives of Interdisciplinary Psychological Consultation and Liasioning in General Medical Hospitals

Authors: Sheeba Shamsudeen, Sunita Purty, Gargi Chauhan Mehta, Mahak Mathur

Contact: sheeba.dr@gmail.com

Country: India

Abstract: Consultation-liaisoning has been defined as the area that encompasses the clinical, teaching, and research activities of mental health professionals in non-psychiatric divisions of a general hospital. “Consultation” is the provision of expert opinion about diagnosis and advice on management regarding a patient's mental state at the request of another health professional. The term “liaison” refers to the linking up of groups for the purpose of effective collaboration. The role of a clinical psychologist is to have an integrated role with medical teams and work with the patient to effectively manage these symptoms. There is a need to promote psychological services to all patients including the medically ill, and this has emerged as one of the significant growth areas in clinical psychology.

Speaker 1 - Sheeba Shamsudeen: Although most of the mental health training in the last 50 years has been provided in the general hospital units, consultation-liaisoning has never been the focus. The functions of consultation liaisoning can be divided into clinical work, teaching, administration, and clinical research. This has brought forward the concept of psychological sequelae of medical disorders and the contribution of psychological manifestations to the etiology, course, and outcome of various medical illnesses. It highlights issues of management of psychological disorders with comorbid medical illnesses for which the role of liaisoning professionals in the identification and appropriate management of medical illnesses has significantly reduced hospital morbidity and health care costs.

Speaker 2 - Gargi Chauhan Mehta: Clinical psychologists have an increasing opportunity to care for patients in medically integrated settings and to serve as educators for interprofessional learners. One of the roles of psychologists in hospitals and primary health care is clinical assessment, and the use of psychological tests for specific purposes, such as to assess current functioning to make diagnoses. Other issues are identified for treatment needs, and to give prognosis, monitor treatment over time, and ascertain risk management. Another activity engaged in by psychologists in health care is intervention, which involves providing a wide variety of clinical interventions for individuals and families with physical and mental health problems. We discuss these psychological interventions and their role in improving the mental health and quality of life of patients with physical health problems.

Speaker 3 - Mahak Mathur: A significant growth has been seen in the scope of clinical psychology in general health setups in India. Various case vignettes will be discussed including patients undergoing treatment for chronic kidney disease, thalassemia, liver cirrhosis, cancer, and patients in palliative care. These would focus on the psychological services provided to patients and their caregivers and extend to providing holistic care to patients. It is imperative for mental health professionals to know their role in pre- and post-organ transplant evaluation, pain management, prevention, diagnosis and treatment of various conditions such as delirium in ICUs, gender reassignment surgeries and cosmetic surgeries among others. Considering the increasing emphasis on providing person-centred care, there is a need to broaden the identification and management of mental health disorders to the interphase of clinical psychology and other disciplines.

Keywords: Consultation-Liaisoning, General Medical Hospitals, Psychological Consultation, Behavioural Medicine, Interdisciplinary Healthcare

2.1: CBT for Child & Adolescent issues

232/T2.1/S/27: Management of Non-Suicidal Self-Injury in Adolescents: Scope for CBT

Authors: M. Thomas Kishore, Prof. K. John Vijay Sagar, Osheen Saxena

Contact: thomas@nimhans.ac.in

Country: India

Abstract: Non-suicidal self-injury (NSSI) is a condition characterized by a deliberate intention to harm self without suicidal intent. Common forms of NSSI are cutting, carving, scratching, burning, exfoliation, and drug overdose. The condition is on the rise in older children, especially among adolescents. Like most, behavioral disorders, NSSI has several risk factors encompassing the biological, psychological, and social domains. E.g. age, sex, difficult temperament, cognitive inflexibility, poor coping and problem-solving skills, emotional regulation skills, invalidating environments, perceived social support, etc. The functions of NSSI can vary. The NSSI can occur with and without a psychiatric disorder. Given the diverse risk factors, presentation and the purpose of the NSSI acts, no single form of therapy is suitable though CBT and DBT seem to be favourable over other therapies. In this regard, this talk focuses on the current understanding of NSSI phenomenology, etiology, and implications for interventions with a special reference to CBT.

Keywords: NSSI, CBT, Adolescents

2.6: Trends in Early Intervention of Psychosis & Personality Disorders

261/T2.6/S/31: Advancements in CBT for Borderline Personality Disorder (BPD): An Indian Perspective

Authors: Dr. Pratibha A.Singh, Dr. Swati Kedia Gupta, Drishte Madan, Dr. Ananya Mahapatra

Contact: pasingh@gn.amity.edu

Country: India

Abstract: Borderline Personality Disorder (BPD) is a complex and challenging mental disorder that significantly impacts the person's emotional responsiveness, self-image, functioning and interpersonal relationships. The manifestation of BPD involves various symptomatic domains along with an elevated risk for suicidal tendencies than most other personality disorders. Reports on BPD focus on its occurrence in different cultures around the world. Currently, in clinical practice, most mental health professionals frequently come across clinical cases that fall in the category of BPD in India and other South Asian countries, but the review illustrates a dearth of studies to systematically explore and understand BPD in Asian cultures. An interesting observation in clinical epidemiology of personality disorders in India is the relatively narrow gap in prevalence between the genders with respect to Borderline Personality Disorder (BPD). There is still less research work on the efficacy of CBT-based intervention in dealing with BPD. The symposium highlights the culturally specific manifestation of BPD in India, the models of understanding the manifestation of BPD and the need for culturally sensitive CBT for BPD in the Indian context. It also embarks upon emotional challenges posed on the therapist due to the emotional processing issues of persons with BPD

and the successful administration of pharmacotherapy along with CBT in dealing with BPD in the Indian context.

Keywords: Borderline Personality Disorder, Emotional Processing, Cognitive Behavioral Therapy (CBT), Dialectical Behavior Therapy (DBT)

2.2: New trends in CBT for Anxiety disorders

263/T2.2/S/30: Advances in Cognitive Behavioral Therapy (CBT) for Obsessive-Compulsive Disorder

Authors: Dr Sachin Reddy K R, Dr Sreenivas Balachander, Mareena Thampy, Dr Y C Janardhan Reddy

Contact: snsachinnandu@gmail.com

Country: India

Abstract: This symposium aims to explore recent developments in the application of Cognitive Behavioral Therapy (CBT) for Obsessive-Compulsive Disorder (OCD). The symposium is organized into three major sections, each focusing on distinct advancements in the field: Inhibitory Learning-Based Exposure and Response Prevention (ERP), In-Patient ERP/CBT, and Non-Invasive Brain Stimulation (NIBS) Augmentation of ERP.

1. In-Patient ERP/CBT: Addressing the unique challenges associated with OCD in in-patient settings, this section explores tailored ERP and CBT interventions designed for individuals requiring intensive treatment. Dr Srinivas Balachander will share experiences and outcomes from in-patient settings, discussing the adaptation of traditional CBT approaches to suit the more controlled and immersive environment along with a family-inclusive approach. The symposium will offer a comprehensive overview of the benefits, practice, challenges, and outcomes associated with in-patient ERP/CBT for OCD.
 2. Inhibitory Learning-Based ERP: The second presenter, Mareena Thampy will be speaking about how existing ERP for OCD can be optimized by using Inhibitory learning (IL) as the core mechanism of extinction. Inhibitory learning theory (ILT) provides a novel foundation for understanding how exposure therapy reduces fear. Inhibitory learning-based exposure is well-documented in anxiety disorders, with demonstrated effects on extinction as a treatment goal. The presentation will highlight the principles of inhibitory learning and its various strategies such as expectancy violation, variability, deepened extinction, labelling of affect, and removal of safety signal and its clinical application for patients with OCD.
 3. NIBS Augmentation of ERP: NIBS techniques such as Transcranial Magnetic Stimulation (TMS) and Transcranial Electrical Stimulation (tES) have emerged as promising techniques to augment traditional treatment interventions for OCD. In recent times, these techniques are also being examined to augment the efficacy of ERP. Dr Sachin Reddy will present the recent research and clinical applications of TMS and tES as adjuncts to ERP, exploring how the combination of these modalities may enhance treatment efficacy. Attendees will gain insights into the neurobiological mechanisms underlying such augmentation strategies, as well as their potential to accelerate and sustain therapeutic gains in individuals with OCD.
- By bringing together experts in the field, this symposium offers a comprehensive overview of the latest advancements in CBT for OCD. Attendees will leave with a deeper understanding of

how inhibitory learning principles, in-patient interventions, and NIBS augmentation can collectively contribute to the ongoing evolution of evidence-based treatments for OCD.

Keywords: Obsessive-Compulsive Disorder, Cognitive Behavioral Therapy, Exposure and Response Prevention, In-Patient ERP/CBT, Non-Invasive Brain Stimulation, Inhibitory Learning

ORAL PRESENTATIONS

2.1: CBT for Child & Adolescent Issues

2/T2.1/OP/2: How do Teachers Experience an Infographic Loneliness Toolkit about Supporting Adolescents to Overcome Loneliness

Authors: Helena Adam, Maria Loades, Vuokko Wallace

Contact: helenaadam1108@gmail.com

Country: Malaysia

Abstract: Loneliness is a common experience among adolescents. As adolescents spend much of their time in school, it is important that school staff can support adolescent students experiencing loneliness. The current study aimed to explore teachers' experiences of a 1-page loneliness toolkit regarding adolescent loneliness. An online survey to collect ratings and descriptions of experiences was distributed to secondary school teachers. Findings showed that both self-rated knowledge and experience of students experiencing loneliness were positively correlated with how useful teachers found the loneliness toolkit. Three themes were developed about how useful teachers found the toolkit; clarity, brings attention to loneliness, and communication. Two themes were developed about how the user experience of the toolkit could be improved; education, and interactive student support. Future research should investigate more effective methodologies aimed at supporting adolescents experiencing loneliness to aid teachers in supporting their students.

Keywords: adolescents; loneliness; teachers; schools; infographics

2.15: Others

15/T2.15/OP/5: Cognitive Behavioural Therapy as a Preventive Measure In Subclinical Depression among Young Adults: Considering Gender Differences

Authors: Sharmistha Basu, Dr Susmita Halder

Contact: sharmisthabasu3@gmail.com

Country: India

Abstract: Every single human being irrespective of their education, or working status has experienced numerous events in their life that put them under pressure to meet their needs which are often beyond their capacity, which often increase their feelings of sadness in everyday life. Sometimes the feeling of sadness continues for a longer period and affects one's daily functioning. Subclinical depression usually refers to an elevation of depressive symptoms that usually do not warrant treatment but that may nevertheless interfere with an individual's ability to function effectively. The present study aimed to find whether males and females with subclinical depression may differ in terms of pre & post-CBT intervention procedures and whether there exists any interaction between gender and CBT interventions in terms of subclinical symptomatology. Considering the purpose, a total sample of 35 subclinical depressive individuals aged 25 to 35 years; based on inclusion and exclusion criteria were selected for the present study. For analysing the data descriptive and inferential statistical measures were used as a prominent technique. The results revealed that the males and females with subclinical depression had significantly different levels of symptom reduction after CBT

interventions and there was a significant interaction effect observed between gender and CBT interventions. The finding also indicated that CBT was found to be more effective for the group of females with subclinical depressive symptoms. From the present study, it may be concluded that Cognitive Behavioural Therapy (CBT) was found to be a preliminary therapeutic intervention to reduce subclinical features and play a preventive role in developing clinical symptomatology in young adults.

Keywords: Subclinical depression; cognitive behavioural therapy; gender

2.15: Others

18/T2.15/OP/6: Exposure and Response Prevention (ERP) and Danger Ideation Reduction Therapy (DIRT) in Long Standing Contamination Obsession Patients in India: An Open-Label Comparative Study

Author: Sampurna Chakraborty

Contact: sampurnachakraborty92@gmail.com

Country: India

Abstract: Aim and Methodology: Psychological treatment of Obsessive Compulsive Disorder (OCD) typically involves Exposure and Response Prevention (ERP). Despite the success of ERP in alleviating the symptoms, there are some limitations, such as treatment refusal and relapses. Danger Ideation Reduction Therapy (DIRT) is a comparatively new, integrated therapy that has been uniquely developed for contamination obsession and washing compulsion. In this study, we aimed at comparing the efficacy of ERP and DIRT among long-standing OCD patients in India on core psychopathology and also on fear and disgust propensity that may be a maintaining factor in the obsession.

Contamination obsession patients were randomly allocated to one of two treatment conditions: DIRT (n=20) and ERP (n=20). Participants received 12 1-hour individual sessions and were assessed at pre-treatment, post-treatment, and one month follow-up with a set of measures assessing OCD symptomatology, depression, anxiety, disgust propensity, and differential fearfulness along with attentional bias. The subjective perception of fear and disgust was substantiated by biofeedback measures of Galvanic Skin Response (GSR), and Electromyogram (EMG).

Summary of Results: Findings showed that both ERP and DIRT were effective in symptom reduction. There was no significant difference in OC symptoms, depression, and anxiety measures in both treatment groups. However, DIRT subjects experienced significantly greater after-treatment reductions in core disgust, contamination-based disgust, sex-moral disgust, and harm avoidance and disgust avoidance measures than ERP subjects. A similar finding was noted for attentional bias and the biofeedback measures. Both therapies had a similar effect on the follow-up measures, however, patients who received DIRT showed slightly greater maintenance measures of disgust sensitivity.

Conclusion: The findings suggest that DIRT and ERP may be equally effective in reducing core OC psychopathology; however DIRT seems to be more effective in reducing specific beliefs in threat perception and experience of acute disgust which may act as a maintenance factor in contamination OCD and therefore may produce better treatment and relapse prevention outcomes than ERP.

Keywords: Obsessive Compulsive Disorder (OCD), Exposure and Response Prevention (ERP), Danger Ideation Reduction Therapy (DIRT), Contamination Obsession, Disgust Propensity

2.10: Transdiagnostic CBT for co-morbid illnesses

20/T2.10/OP/8: Executive Functions among People with Self-Harm Behaviors in Bangladesh

Authors: Marzia Al-Hakeem, Mohammad Zayeed Bin Alam

Contact: mrz.al.hakeem@gmail.com

Country: Bangladesh

Abstract: Research has highlighted the involvement of executive functions (EF), such as cognitive flexibility and inhibition, in the context of deliberate self-harm (DSH). Individuals who engage in DSH often experience difficulties in regulating their emotions and behaviors (Hasking, Whitlock, Voon and Rose, 2017) which are closely tied to EF. Moreover, there are studies demonstrating cultural differences in EF development (Cho et al, 2023). While evidence from western populations underscores the significance of EF deficits in DSH, a crucial gap exists in understanding the role of EF in DSH within non-western populations like Bangladesh. Also, majority of studies in literature focused on the role of EF dysfunction in DSH among adolescents. The aim of the present study will be to investigate whether there are EF deficits among adult individuals with DSH in Bangladesh. Based on findings and impressions from previous studies, it is hypothesized that people who have self-harm tendencies will demonstrate some level of executive dysfunction. This study will include adult participants with and without self-harm behaviors. A cross-sectional survey design will be used to conduct the study and data will be collected via online survey following non-probability sampling techniques. Exclusion criteria will include participants sustaining neurological or neurodevelopmental disorders, drug addiction, and having psychotropic medication which have significant impact on EF. Bangla versions of the Self-harm inventory, Frontal System Behaviour Scale (FrSBe), and WHO Wellbeing Index (WHO-5) will be used as measures. The analysis will include independent samples t-test, ANOVA, correlations, and regression analysis for identifying the group differences and associations among variables. The findings of the study may shed light on the universality or cultural specificity of executive functions in the context of DSH, contributing to a more comprehensive understanding of the underlying mechanism of DSH across diverse cultural backgrounds and also to a more accurate management plan including appropriate cognitive and behavioral techniques.

Keywords: self-harm behavior, executive function, neuropsychology, emotion regulation

2.15: Others

32/T2.15/OP/13: Cognitive-Behavioral Therapy for Adult ADHD with Overlapping Clinical Presentations

Authors: Shinjini Samajdar, Susmita Halder

Contact: shinjini.samajdar@gmail.com

Country: India

Abstract: Attention-deficit hyperactivity disorder (ADHD), is a common clinical condition in childhood however in clinical practice ADHD in adulthood are also increasing in numbers. In adulthood, symptoms presentation is quite different in nature. At times it overlaps with symptoms of anxiety or impulse control disorders rather than only hyperactivity and inattention. Overlapping clinical manifestations lead to multifaceted diagnostic and therapeutic challenges. This case series delves into the influence of individual symptom manifestations, the identification process, and treatment outcomes of Adult ADHD.

Aim and Methodology: The current case study aims to elucidate the effectiveness of a tailor-made CBT-based intervention in adult ADHD. In the present study, the CBT intervention commenced with psychoeducation, followed by the establishment of attainable and realistic goals, effective time management skills, the management of daily life and work responsibilities, impulse control, distraction management, emotional regulation, problem-solving, and social skills enhancement.

Summary of Result: Efficacy was assessed on a case-by-case basis, employing pre- and post-intervention measures through statistical analysis.

Conclusion: In conclusion, it is suggested that further research involving a larger population is imperative to comprehensively evaluate the viability of CBT in the management of adult ADHD.

Keywords: Adult ADHD, Cognitive-Behavioral Therapy, Clinical Presentation

2.2: New trends in CBT for Anxiety disorders

37/T2.2/OP/14: Exploring illness specific positive beliefs and their influence among patients with anxiety disorder

Authors: Madhurima Saha, M. Kamruzzaman Mozumder

Contact: madhurima.hia@gmail.com

Country: Bangladesh

Abstract: Background: Distress due to anxiety disorders are studied very extensively worldwide to conceptualize the core phenomenon and devise intervention plan to help people. However, several studies also showed that people have positive attitudes towards certain aspects of anxiety (e.g., positive meta-belief in GAD, and post-event processing in social anxiety). Aim: The aim of this study was to explore the positive beliefs about anxiety and its impact on people with anxiety-based disorders. Method: A qualitative research design with a grounded theory approach was adopted for it. Purposive sampling technique was used to select eleven participants suffering from multiple mental health disorders with core anxiety features. Data was collected using an in-depth interview method, incorporated with narrative interview and photo elicitation techniques. Qualitative data was thematically analyzed. Findings: The findings suggested that people with anxiety disorder have positive beliefs about their disorders over five broad domains; productivity, personal growth and development, skills and resources, safety and security, and wellbeing. The participant reported both, positive and negative impacts, of these positive beliefs. They reported that for the positive belief they are being more conscious about themselves and their family members, however, these positive beliefs are making them more anxious and interfering with normal functioning. Three key informants were interviewed to strengthen the validity of the data. The key informants mostly corroborated the findings came from the participants. Conclusion: The findings of the research have revealed

new cognitive aspects of anxiety disorders which might be utilized in devising updated cognitive formulations and designing effective cognitive intervention plans for the patients.

Keywords: Illness Specific Positive Believe, Anxiety, Anxiety disorder.

2.1: CBT for Child & Adolescent issues

41/T2.1/OP/16: Predictors on the Effectiveness of Group Cognitive Behaviour Therapy for Adolescents Living in Sheltered Homes

Authors: Ding Wai Eng, Firdaus Mukhtar, Lye Munn Sann, Hamidin Awang

Contact: drfirdaus@upm.edu.my

Country: Malaysia

Abstract: This study was conducted among 139 orphaned Malaysian adolescents living in sheltered homes aimed to assess the effectiveness of the SAHABAT program, a group Cognitive Behavioral Therapy (CBT) intervention, in addressing depression and anxiety. The participants initially exhibited mild depression but moderate anxiety and high levels of negative automatic thoughts (NAT). The study revealed that the type of intervention (SAHABAT program) was the most significant predictor of post-intervention and change outcomes for depression and anxiety, outweighing socio-demographic factors and baseline psychological scores. This result aligns with previous research, suggesting that pre-intervention anxiety score were good predictors of recovery from depression post-intervention and for change outcomes, and vice versa except pre-intervention depression score did not predict for anxiety change outcomes. Previous research supported the idea that anxiety often precedes depression, and individuals with this comorbidity tend to retain a primary diagnosis of anxiety disorders. The pre-intervention NAT scores were significant predictors for depression outcomes at post-intervention and in terms of change, consistent with previous findings. However, NAT did not predict anxiety outcomes post-intervention and in term of change, potentially due to the high NAT score at baseline had less impact on moderating anxiety than mild depression. The pre-intervention self-esteem score was a predictive factor for anxiety and depression outcomes at post-intervention and in terms of change but not for immediate post-intervention depression. The causal relationship between self-esteem and depression or anxiety should be interpreted cautiously. Pre-intervention anger scores did not predict outcomes for depression or anxiety both at post-intervention and in terms of change, however, limited research on CBT response for anger limits the interpretation of this finding. The study reveals that socio-demographic variables are unreliable predictors except for age. These findings highlight the importance of addressing psychological well-being in vulnerable populations and the need for tailored interventions.

Keywords: adolescents, anxiety, depression, group cognitive behavioural therapy, negative automatic thoughts, predictor, SAHABAT, self-esteem

2.3: Advances in treatment of mood disorders and suicidal behavior

45/T2.3/OP/18: Characteristics of cognitive control function in patients with non-suicidal self-injury and the role of dialectical behavior therapy

Authors: Nan Lang

Contact: 1774196626@qq.com

Country: China

Abstract: Objective: The aim of this study was to investigate the therapeutic effects of dialectical behavior therapy skills training (DBT-ST) in patients with different non-suicidal self-injurious (NSSI) behaviours in terms of cognitive-emotional changes as well as changes in brain functions.

Methods: The experiment used multiple scales and cognitive experiments to study 185 patients with self-injury and 177 healthy individuals. NSSI patients were randomly assigned to a 13-week simplified Dialectical Behavior Therapy Skills Training (DBT-ST) group (90 patients) and a Social Support Group Therapy (SSGT) group (95 patients) to test the efficacy of DBT-ST on patients' cognitive control. Further imaging analyses were performed on patients with fMRI data.

Results: When the valence of words and facial emotions is inconsistent, the accuracy of facial judgment tasks is significantly negatively correlated with self-injury behavior and Emotional Regulation Difficulty Scale (DERS) factor 2 ($r=-0.23$, $p<0.05$; $r=-0.19$, $p<0.05$); the reaction time of facial judgment tasks is positively correlated with DERS factor 5 ($r=0.21$, $p<0.05$) with consistent. The accuracy and response time of patients in the DBT-ST group were significantly better after treatment than before intervention ($p<0.05$). Significantly higher Functional Connectivity (FC) between right anterior cingulate cortex and right precentral/postcentral gyrus ($F=22.68$) and left postcentral gyrus ($F=19.46$), and between right midcingulate cortex (MCC) and bilateral calcarine were found after DBT-ST, compared with SSGT, while FC between right MCC and bilateral calcarine/cuneus (left, $F=19.49$; right, $F=14.87$) was significantly decreased.

Conclusion: NSSI patients have difficulty judging facial emotions, and managing and controlling emotional conflicts; Cognitive control of emotional conflict in NSSI patients is associated with self-injurious behavior and difficulty in emotional management. DBT have an impact on the cognitive control function of emotional conflict in NSSI patients. After treatment, the negative emotions of patients are alleviated and the fluctuation of emotions can be adjusted promptly.

Keywords: dialectical behavior therapy; non-suicidal self-injury

2.15: Efficacy of third wave CBT approaches & way forward.

46/T2.15/OP/19: Exploring the Impact of Acceptance and Commitment Therapy (ACT) on Mitigating Academic Procrastination and Sleep Disturbances Among Malaysian Undergraduates: A Pilot Study

Authors: Lee Sook Huey, Fatanah Ramlee, Azizah Othman

Contact: sookhuey5398@gmail.com

Country: Malaysia

Abstract: Academic procrastination and sleep disturbances are pervasive challenges among university students, yet interventions targeting these issues are relatively scarce. This study aims to address this gap by investigating the effectiveness of Acceptance and Commitment Therapy (ACT) in reducing both academic procrastination and sleep disturbances among undergraduates. We conducted a quasi-experimental quantitative and longitudinal study using a two-arm parallel group randomized controlled design to evaluate the impact of ACT compared to an active control group on academic procrastination and sleep disturbances. Outcome assessments were conducted using the Tuckman Procrastination Scale, Pittsburgh Sleep Quality Index, and Psy-Flex at baseline, after session 3, post-test, and a 1-month follow-up. Thirty participants who met the inclusion criteria were recruited and randomly assigned to undergo six online sessions of either ACT or Motivational Interviewing (control group) program. The study was scheduled to continue until early 2024. ANCOVA analyses will be used as inferential statistics to test the effect of the treatment group on the intermediate/post-test/follow-up scores for procrastination, sleep disturbances, and psychological flexibility, with the pretest score as the covariate. To our knowledge, no previous research has explored the potential of ACT as an effective intervention for reducing academic procrastination and sleep disturbances among university students. Given the flexibility of ACT, this study represents a pioneering effort to examine its viability as an efficient intervention to address these interconnected challenges faced by undergraduates. This study will contribute significantly to the field of student well-being and academic success.

Keywords: acceptance and commitment therapy, procrastination, sleep

2.3: Advances in treatment of mood disorders and suicidal behavior

52/T2.3/OP/20: DNA methylation changes post-DBT in NSSI patients

Authors: Pengyu Du

Contact: 522022350013@smail.nju.edu.cn

Country: China

Abstract: Purpose and Methods: The mechanism of action of dialectical behavioral therapy (DBT) in patients with non-suicidal self-injury (NSSI) and the epigenetic explanation for the complex interplay of genetic factors in NSSI are unclear. DNA methylation sequencing was performed on samples from 37 NSSI patients at baseline and after DBT. Multi-target region methylation enrichment sequencing technology was used to conduct a randomized controlled study, and PCA was used to analyze cluster analysis and methylation level difference to analyze the differences in DNA methylation levels before and after DBT treatment.

Keywords: DNA methylation,, dialectical behavior therapy, non-suicidal self-injury

2.1: CBT for Child & Adolescent issues

55/T2.2/OP/21: Family UNited: Piloting of a new universal UNODC family skills programme to improve child mental health, resilience and parenting skills in Indonesia and Bangladesh

Authors: Md. Amir Hussain, Karin Haar, Aala El-Khani, Narendra Narotama, Eva Fitri, Aip Badrujaman, Eka Wahyuni, Shah Mohammad Naheean, Ali Yassine and Wadih Maalouf

Contact: amirsaju1704@gmail.com

Country: Bangladesh

Abstract: Background: Family is one of the most influential social institutions and caregivers act as the main protective factors for children's mental health and resilience skills. Family skills programmes support caregivers to be better parents and strengthen positive age-specific and age-appropriate family functioning and interactions. We developed a universal, brief and light programme for implementation in low-resource settings; the Family UNited (FU) programme and conducted a pilot study to show feasibility of implementation, replicability and effectiveness in improving family functioning, child behaviour and resilience.

Methods: We recruited caregivers with children aged 8-14 years through schools in East Java, Indonesia and Dhaka, Bangladesh to the FU programme. Demographic data, emotional and behavioural difficulties of children, child resilience and parental skills and family adjustment measures were collected from children and caregivers before, 2 and 6 weeks after the intervention. Outcome was assessed through the SDQ (Strengths and Difficulties Questionnaire), PAFAS (Parenting and Family Adjustment Scales) and CYRM-R (Child and Youth Resilience Measure).

Results: We enrolled 29 families in Bangladesh and allocated 37 families to the intervention and 33 to the control group in Indonesia. Overall, there was no effect over time in the control group on any of the PAFAS subscales, whereas significant reductions in scores were found on six of the seven subscales in either country in the intervention group, most prominently in caregivers with higher scores at baseline. We found highly significant reductions in total SDQ scores in the intervention group in both countries, whereas there was no effect over time in the control group in Indonesia. Boys in the intervention group in Indonesia and in Bangladesh seemed to have benefitted significantly on the SDQ as well as the total resilience scale. Overall, on the CYRM-R, particularly children below the 33rd percentile at pre-test benefitted substantially from the programme.

Conclusions: The implementation of a brief family skills programme was seemingly effective and feasible in resource-limited settings and positively improved child mental health, resilience and parenting practices and family adjustment skills. These results suggest the value of such a programme and call for further validation through other methods of impact assessment and outcome evaluation.

Clinical Trial Registration: ISRCTN (number pending payment, technically approved), retrospectively registered, 22 September, 2022.

Keywords: Universal family skills programme, child mental health, child resilience, parenting skills, Indonesia, Bangladesh

2.3: Advances in treatment of mood disorders and suicidal behavior

56/T2.3/OP/22: Efficacy of Dialectical Behavioral Therapy for Non-suicidal Self-injury Behaviors: A Multicenter Randomized Clinical Trial

Authors: Zhengyi Li, Jieni Guo, Yumin Zhang, Xuelian Bai, Chun Wang

Contact: vnlzy@outlook.com

Country: China

Abstract: Aim: To evaluate the clinical efficacy of 13 weeks of Dialectical Behavior Therapy Skills training (DBT- ST) with social support group therapy (SSGT) in patients with NSSI, including short-term efficacy after the intervention, and long-term efficacy at one-year follow-up.

Methodology: This is a 13-week multicenter, randomized, double-blind, clinically controlled intervention study. Subjects included 206 participants aged 13-59 years who met the DSM-5 diagnostic criteria for NSSI and had no significant suicidal ideation or behavior one month prior to the start of the study. Participants were recruited from the psychiatric and psychological counseling departments of 14 hospitals in China.

Participants were randomly assigned either to the DBT-ST group or SSGT group. In the DBT-ST group, participants were taught skills designed to reduce NSSI: emotion regulation, distress tolerance, mindfulness, and interpersonal effectiveness. At the same time, participants in the SSGT group discussed the challenges of their condition and supported each other.

Results: Results were tested for time effects, speed, and between-group differences using generalized linear mixed models, t-tests. From the time span of the baseline period to the follow-up period, the DBT-ST group was significantly better than the SSGT group in NSSI behaviours, impulsivity, and positive regulation strategies. In addition, there was no significant difference between the two groups in the follow-up period on the outcome indicators of borderline symptoms, difficulties in emotion regulation, mindfulness, psychological resilience, emotional intelligence, and perceived social support; however, the DBT-ST group presented significantly faster improvement and showed significantly better improvement right after the intervention.

Conclusions: Combining short-term efficacy and long-term efficacy, the DBT-ST group showed superior efficacy to the SSGT group in the primary outcome indicator of NSSI behaviour, as well as in several secondary outcome indicators, possibly suggesting that a simplified version of DBT that retains only the skills training module is a better treatment for NSSI.

Keywords: Non-suicidal Self-injury, Psychotherapy, Randomized Controlled Trial, Follow-up, Dialectical Behaviour Therapy

2.15: Others

58/T2.15/OP/24: The Level of Dispositional Mindfulness and Its Correlation with Perceived Stress and Psychological Distress Among Undergraduate Students

Authors: Rysul Islam Mahmud, Dr. Md. Shariful Islam

Contact: mawlana0007@gmail.com

Country: Bangladesh

Abstract: Aims: There has been an increasing acknowledgment of the relationships between dispositional mindfulness, perceived stress, and psychological distress. However, most of these works have been performed in US samples or samples from Western countries. The purpose of this investigation was to investigate the prevalence of dispositional mindfulness, perceived stress, and psychological distress among university undergraduate students in Bangladesh and the relationship between them.

Methodology: This cross-sectional research investigated the association of dispositional mindfulness (MAAS), perceived stress (PSS – 10 – B), and psychological distress (GHQ-28) among individuals. A random population-based sample of N = 189, mean age (of 22.10) at the University of Rajshahi, Bangladesh was done through face-to-face interviews and objective assessment to participate in the investigation.

Results: the mean extent of dispositional mindfulness was 3.80, perceived stress was 20.49 and psychological discomfort was 31.20 discovered. A strong negative relationship between dispositional mindfulness and experienced stress $-.64$ and psychological distress $-.70$ was identified, while the association between psychological distress and perceived stress was $.71$ highly positive. The regression analysis demonstrated that perceived stress's link with psychological discomfort was lowered for individuals with a greater degree of dispositional mindfulness. The investigation also revealed that the female individuals had a lower degree of mean dispositional mindfulness than male participants.

Conclusion: Results imply that dispositional mindfulness could buffer against the adverse impact of perceived stress and psychological discomfort on mental wellness. These results supply further evidence for the use of mindfulness training as a technique for enhancing psychological functioning among undergraduate students who are suffering from stress and anxiety.

Keywords: Dispositional Mindfulness, Perceived Stress, Psychological Distress, Regression, Correlation

2.15: Others

60/T2.15/OP/26: Challenges and recommendations of psychosocial support and medical care in pediatric cancer care: Perception of nurses and caregivers

Authors: Nahida Sultana, Madhurima Saha, Zannat Ara, Mohammad Zayed Bin Alam

Contact: nahidasultana2468@gmail.com

Country: Bangladesh

Abstract: Background: In Bangladesh, pediatric oncology presents a complex landscape. Limited information is available regarding multifaceted challenges surrounding both psychosocial and medical care for children with cancer.

Aim: Since oncology nurses and parents (family caregivers) are closely connected with cancer services, our study aimed to explore their perspectives about challenges and recommendations in quality cancer care.

Methodology: A phenomenological approach in qualitative study design was chosen for this research. Purposive sampling was used to select oncology nurses and caregivers of child cancer patients. Two FGDs were conducted (one with 10 nurses, another with 7 caregivers). In

addition, two in-depth interviews with bereaved caregivers were conducted. Two tailored interview schedules were followed to collect data from the participants.

Results: Thematic content analysis was conducted for data analysis. In exploration of barriers, five themes emerged from the analysis: psychological support, delay and discontinuation, communication, accessibility and availability and other barriers (financial, social, language). According to the nurses, they found it challenging to provide psychosocial support to the patients and the caregivers and sometimes they felt helpless. Delay and gaps in treatment resulting from financial burden and poor communication were also salient barriers. Besides, quality cancer treatment was unavailable in district-level hospitals and clinics causing delays in treatment. The barriers reported by the participants were interconnected and formed a complex network of problems. The participants also offered some way forward to these problems, which were coded under five themes: social awareness, stress management, recreational activity, clear communication, and ward management.

Conclusion: The present research attempted to uncover the intricate challenges in pediatric oncology in Bangladesh, emphasizing the urgent need for improved support. The interconnected barriers call for enhanced psychological, social, and medical care with recommended strategies mentioned by the nurses and caregivers.

Keywords: Pediatric oncology, psychosocial support, quality cancer care, oncology nurse, qualitative study, thematic analysis

2.1: CBT for Child & Adolescent issues

74/T2.1/OP/32: Psychological capital as Predictor of post traumatic growth in individuals with adverse childhood Experiences

Authors: Manisha Nath, Megha Kochhar

Contact: manishanath.oct96@gmail.com

Country: India

Abstract: Aim: The purpose of this study is to understand the association of Psychological Capital with post traumatic growth in individuals with a history of adverse childhood experiences, as well as to explore Psychological Capital as a possible predictor of Post Traumatic Growth.

Method: Participants for the quantitative study consisted of individuals of the age group of 19-45 years who were screened for having adverse childhood experiences using standardized tools. Their level of post traumatic growth and psychological capital was then assessed to understand their relation.

Results: There was a significant positive relationship between PsyCap and PTG and hope was most strongly associated with and a significant predictor of Post-traumatic Growth.

Conclusion: The findings provided evidential support to the correlation between Post Traumatic Growth and psychological capital. Based on this finding, we can plan out therapeutic interventions, modify present CBT techniques to promote hope and PsyCap that will help facilitate post traumatic growth in individuals dealing with adversities and help support survivors in recognizing and accepting possible benefits from their adverse experiences.

Keywords: Adverse childhood Experiences, Post Traumatic Growth, Psychological Capital

2.15: Others

81/T2.15/OP/35: Psychometric Properties Of The Self-Compassion Scale For Youth (Scs-Y) - Thai Version

Authors: Kongsonthana, A., Permpoonputtana, K., Ularntinon, S., Tangjittiporn, T.

Contact: auschara.kn@gmail.com

Country: Thailand

Abstract: Introduction: Self-compassion or ability to treat oneself with love and care plays an important role in well-being of adolescents given the period of identity and self-concept formation. Self-Compassion Scale for Youth (SCS-Y) consists of 17 items to measure six dimensions of self-compassion; self-kindness, common humanity, mindfulness, self-judgment, isolation, and over-identification. The objective of this study is to evaluate the psychometric properties of the SCS-Y (Thai-version).

Method: A total of 204 adolescents, with a mean age of 12.19 years, participated in this study. The original Self-compassion scale for youth (SCS-Y) was translated into Thai and cross-culturally adapted for use among adolescents in Thailand. The translation process consisted of six steps: 1) forward translation; 2) review and synthesizing of the translation; 3) backward translation; 4) review and consideration by an expert committee; 5) pilot testing of the pre-final version with the children, and 6) final review by an expert committee to adjust a final version. The initial psychometric properties of the SCS-Y Thai version were assessed. Content validity was quantified by the item-objective congruence (IOC) value for each item. Internal consistency was measured with Cronbach's alpha coefficient, and test-retest reliability was calculated from an intraclass correlation coefficient.

Result: The Thai version of the SCS-Y has acceptable internal consistency ($\alpha=0.77$) and good test-retest reliability (intraclass correlation coefficient [ICC] =0.8) and content validity (IOC value >0.7). There was also a statistically significant positive correlation between participants' self-compassion and coping strategies.

Conclusion: Self-Compassion for Youth (SCS-Y) Thai version could be culturally responsive applied in Thai children and adolescents with good psychometric properties.

Keywords: Self-Compassion Scale for Youth, Validity, Reliability

2.7: CBT for chronic and specific medical conditions

83/T2.7/OP/37: Mitigating Fear of Falling in Stroke Survivors through Mindfulness-integrated Cognitive Behavioural Therapy: A Case Series Study

Authors: Vikas Kumar, Dr. Rajesh Kumar, Dr. Shuvabrata Poddar

Contact: vikas.clpsy@gmail.com

Country: India

Abstract: Background: The fear of falling constitutes a substantial concern for stroke survivors, stemming from physical impairments and balance issues, significantly impacting

their overall well-being and quality of life. This apprehension leads to decreased mobility, resulting in heightened sedentary behaviour, muscle weakness, and diminished physical functioning. Furthermore, it elevates the risk of future falls as survivors may avoid rehabilitation and exercise, impeding their recovery and affecting their cognitive and emotional well-being, thereby further hindering their daily lives.

Objective: This case series study aims to investigate the effectiveness of Mindfulness-integrated Cognitive Behavioural Therapy (MiCBT) to mitigate the fear of falling in stroke survivors.

Methods: The case series encompassed a structured MiCBT program involving individuals who had experienced strokes and exhibited varying degrees of fear of falling. The program spanned eight weekly sessions, which included psychoeducation, cognitive restructuring and integrating mindfulness meditation. Primary assessments included the Fear of Falling Questionnaire (FFQ), supplemented by secondary evaluations of anxiety, depression, and quality of life.

Results: The case series study demonstrates a notable reduction in fear of falling scores subsequent to the MiCBT intervention. Participants reported enhanced self-efficacy, diminished symptoms of depression, anxiety and an improved quality of life. Qualitative feedback from participants underscores heightened self-awareness, enhanced emotional regulation, and increased confidence in daily activities.

Conclusion: While acknowledging the necessity for further research with larger sample sizes and control groups, this study suggests that MiCBT holds promise as an intervention for alleviating the fear of falling in stroke survivors. This approach offers potential advantages for the rehabilitation and overall well-being of stroke survivors grappling with the fear of falling, thereby meriting further exploration and consideration as a valuable addition to existing strategies in stroke rehabilitation.

Keywords: Stroke, Fear of Falling, MiCBT, Well-Being

2.3: Advances in treatment of mood disorders and suicidal behavior

84/T2.3/OP/38: Rumination in Depression: A neuropsychological intervention-based fMRI study

Authors: Anindita Ghosh, Dr. Basudeb Das, Dr. Priyanka Lenka

Contact: aninditaghosh257@gmail.com

Country: India

Abstract: Background: Depression causes dysregulation in various psychological afferents and often leads to a repetitive passive response mode of rumination. Complex neurobiological processes involved in depression leading to series of psychological symptoms might have been identified; however various literature seem to lack evidences for the dynamic neuropsychological duality of the processes.

Aim and Methodology: The aim of the study is to explore the impact of rumination focused cognitive behavior therapy and cognitive retraining on rumination of patients with depression and to measure functional connectivity their changes across the brain regions.

The present study was a hospital-based prospective longitudinal intervention study. The sample comprised of two groups of 15 patients each, diagnosed with any form of Depression without psychotic symptoms (according to ICD-10 DCR criteria), following clear exclusion criteria of

any comorbid diagnoses, selected via purposive sampling. Patients in one group were administered Rumination Focused Cognitive Behaviour Therapy with Cognitive Retraining for 4 weeks along with pharmacotherapy; while the other group was only provided pharmacotherapy. Baseline and post intervention assessments were conducted focusing on rumination using rating scales and fMRI recordings were taken across both timelines to measure functional connectivity during different levels of rumination. The fMRI analysis was performed using Matlab software (R2022a) and CONN toolbox with SPSS 27.0 for statistical analysis of the data.

Summary of results: The findings indicate significant reduction in rumination suggesting therapeutic effectiveness along with functional connexions and peak voxels across brain areas.

Conclusion: The present study highlights the changes in depression due to therapeutic effectiveness with rumination as core component along with neurological correlates.

Keywords: Rumination, CBT, fMRI, neuropsychology, depression, psychotherapy.

2.3: Advances in treatment of mood disorders and suicidal behavior

100/T2.3/OP/46: Neural Correlates of Emotional Regulation and Rumination in Response to Brief Cognitive Behavior Therapy among Patients with Depression: An ERP Study

Authors: Aparna Verma, Dr. Neha Sayeed, Prof. (Dr.) Basudeb Das, Dr. Umesh S

Contact: aparna.ver19@gmail.com

Country: India

Abstract: Background: Depression is a prevalent mental health disorder characterised by dysregulated emotional responses and persistent rumination. Cognitive Behavioral Therapy (CBT) is an established therapeutic approach for alleviating depressive symptoms, but the underlying neural mechanisms of its efficacy remain an area of active investigation.

Objective and Method: This study used ERPs to investigate the neural correlates of emotional regulation and rumination in twenty patients with depression who received brief CBT. They underwent ERP recordings during emotional tasks before and after therapy to find neural markers for emotional regulation and rumination and track changes due to CBT.

Result and Discussion: The results indicated notable changes in ERP components related to emotional regulation and rumination. This included increased N2 and P3 component amplitudes, signifying improved cognitive control and attention to emotional stimuli after CBT. Additionally, a reduced late positive potential (LPP) amplitude indicated decreased emotional reactivity following CBT, suggesting improved emotional regulation. Moreover, there was a decrease in LPP amplitude during rumination-inducing tasks, indicating reduced attention and emotional engagement with depressive thoughts, providing CBT's potential to diminish rumination tendencies through neural changes.

Conclusion: This ERP study uncovers neural insights about emotional regulation and rumination in individuals with depression undergoing brief CBT. It highlights neurobiological changes linked to improved emotional regulation and reduced rumination, potentially making CBT more effective for depression treatment. Understanding these neural mechanisms can guide the development of targeted interventions for depression and related mood disorders.

Keywords: ERP, Brief-CBT, Emotional Regulation, Rumination, Depression

2.5: CBT treatment for substance abuse and addictive behaviours

110/T2.5/OP/50: Driving Towards Change: Evaluating The Efficacy of Brief Cognitive Behavioral Therapy for Mitigating Reckless Driving in Recreational Drug Users

Authors: Stella Yangzee Sherpa, Dr Rita Rani Talukdar

Contact: starphoenix.stella@gmail.com

Country: India

Abstract: Reckless driving, a pervasive concern on our roads, remains a leading cause of accidents and fatalities, posing a substantial threat to public safety. When combined with recreational drug use, the potential for dangerous behaviour behind the wheel becomes even more pronounced. This study will explore a solution to this alarming issue – the application of Brief Cognitive Behavioural Therapy (CBT) to reduce reckless driving among recreational drug users. This research is critical considering the concerning statistics surrounding road accidents and the prevalence of drug use among young adults. By evaluating the effectiveness of CBT, we seek to uncover insights into strategies that can drive positive behavioural change and enhance road safety.

This research paper will present an experimental study aimed at investigating the effectiveness of Brief Cognitive Behavioural Therapy (CBT) in mitigating reckless driving behaviour among recreational drug users aged 18-35. A sample of 30 recreational drug-using participants will be selected, and a control group will be included for comparative analysis.

The research design employed in this study is experimental, with a focus on evaluating the pre- and post-intervention changes in dangerous driving behaviour. The intervention consisted of 4-6 sessions of Brief Cognitive Behavioural Therapy, tailored to address, and rectify reckless driving behaviour among the experimental group. To compare and analyse the data, the t-test statistical method can be utilized if the data is normally distributed. And find out whether significant changes in reckless driving behaviour have occurred. The study will help gauge the variance in dangerous driving behaviour before and after the intervention. The results of this study will contribute valuable insights into the potential impact of Brief Cognitive Behavioural Therapy in reducing reckless driving behaviour among recreational drug users within the specified age range, with implications for road safety interventions and public health initiatives.

Keywords: recreational drug user, reckless driving, public safety, accidents, behavioural change

2.1: CBT for Child & Adolescent issues

111/T2.1/OP/51: Efficacy of an Expressive-Cognitive Intervention (ECI) in addressing self-perception and global level of functioning in adolescents with internalizing problems

Authors: Asmita Dalvi, Dr. Madhumita Bhattacharyya, Dr. Daya Ram

Contact: asmita.dalvi91@gmail.com

Country: India

Abstract: Adolescence is a period of tremendous learning, exploration, and opportunity. Yet it is also a time when behavioural and emotional problems emerge or worsen. Psychopathology in adolescence leads to considerable functional impairment, may persist into adulthood, and is

a cause for poor sense of self (Natarajan, 2013). A meta-analysis reported that 6.5% of the community samples and 23.3% of school samples experienced significant mental health morbidity (Malhotra & Patra, 2014). **Aim & Methodology:** The present study aims at assessing the efficacy of an Expressive-Cognitive Intervention in improving the self-perception and global level of functioning in adolescents with internalizing problems. The pretest – posttest research design employed a sample of 10 adolescents seeking inpatient treatment at Erna Hoc Centre for Child & Adolescent Psychiatry, Ranchi. They received 12 sessions of the Expressive-Cognitive Intervention (ECI) module focusing on understanding and dealing with their perception and sense of self. Pre & post intervention assessment was done using the Self Perception Profile for Adolescents by Harper (1988) and Children's Global Assessment Scale (CGAS). **Results:** Compared to pretest scores, the scores post intervention showed statistically significant increase in global self-worth and adolescents' overall level of functioning. **Conclusion:** The results imply that the ECI module positively impacts the adolescents' recovery and their ability to develop a positive view of themselves.

Keywords: Expressive-Cognitive Intervention, Internalizing problems, Self-perception.

2.1: CBT for Child & Adolescent issues

112/T2.1/OP/52: Non-Specific Factors in a manual-based CBT for Non-Suicidal Self-Injury in Adolescents: An Interpretative Phenomenological Analysis

Authors: Osheen Saxena, Dr M Thomas Kishore, Dr Ajay Kumar, Dr K John Vijay Sagar, Dr B Binukumar

Contact: osheen3194@gmail.com

Country: India

Abstract: **Aim and Methodology:** Non-suicidal self-injury (NSSI), which is the self-inflicted injury of one's body tissue without suicidal intent and due to purposes not socially or culturally sanctioned. NSSI is a growing mental health concern among adolescents, however, there is a lack of understanding regarding its management in clinical settings. This study was aimed at understanding the effectiveness of a manual-based CBT programme, called the 'Cutting Down Programme' (CDP) for managing NSSI among adolescents, and to explore the subjective experiences of the adolescents during therapy to elicit the non-specific factors associated with the process of therapy. The study involved 30 adolescents with NSSI who presented to the out and in-patient settings of the Dept. of Child & Adolescent Psychiatry, NIMHANS, Bangalore. The assessment of NSSI methods and functions was done using the Functional Assessment of Self-Mutilation (FASM). The CDP was delivered, and a semi-structured interview was to elicit the frequency and intensity of NSSI acts and urges weekly. The patients' motivation was assessed using the Client Motivation for Therapy Scale (CMOTS) at baseline, and patients' perceptions of therapy were assessed using the Individual Therapy Process Questionnaire (ITPQ) after termination of CDP. A total of 5 adolescents from completers were purposively selected for a qualitative interview to understand their subjective experiences of therapy. Interpretative phenomenological analysis was used to arrive at superordinate, subordinate, and subthemes.

Summary of Results: The CDP was found to be effective in reducing NSSI in adolescents. The IPA revealed three superordinate themes, namely, recovery from self-harm tendencies, non-

specific factors underlying the mechanism of change, and the impact of contextual factors on recovery. The first focused on the helpful techniques and factors that brought about recovery from self-harm tendencies after therapy, the second focused on the role of the patient and therapist factors, therapeutic alliance, and termination process in the process of change, and the third focused on the influence of parenting, peer and schooling factors on the therapy outcome. Conclusions: NSSI is a multi-faceted and complex phenomenon, which can have diverse aetiologies, clinical presentations, methods, functions, and psychiatric comorbidities. Hence, psychotherapy for NSSI needs to be adapted to the individual needs of the patients. The CDP was effective in managing NSSI, however, many non-specific factors such as the patient's motivation and the patient's perceptions of therapy are important in the mechanism of change through therapy. The findings are discussed.

Keywords: Non-Suicidal Self-Injury, Adolescence, Non-Specific Factors, Cutting Down Programme

2.5: CBT treatment for substance abuse and addictive behaviours

119/T2.5/OP/54: A qualitative study to explore cognitive-behavioural components associated with internet addiction from perspective of youths with internet addiction

Authors: Bachaspatimayum Deeparani Devi, Meenakshi Gupta, Masroor Jahan, Amool R. Singh

Contact: deepabachas@gmail.com

Country: India

Abstract: Background: Internet addiction is a widespread issue in today's world, especially among emerging young adults. As internet addiction is increasingly becoming mental health concerns even in the developing nations after the COVID pandemic, it is important to qualitatively explore various factors associated with this problem from the perspective of the youths having problems related to internet addiction themselves. This can further help in developing a management or treatment module adding their perspectives. Objectives: To explore cognitive and behavioural factors associated with internet addiction from perspectives of youths with internet addiction. Materials and Method: A total of 25 participants, aged between 19-23 years were selected using purposive sampling. They took part in focus group discussion, using the semi-structured discussion guide which is made for this study. The data was analysed using thematic analysis. Results and Conclusion: The findings will be discussed in the light of literature.

Keywords: Internet Addiction, Qualitative, Cognitive-Behavioural components

2.9: CBT for Cancer, pain management, and Palliative care

121/T2.9/OP/55: Exploring the Relationship between self-compassion, coping strategies along with its effects on well-being of Cancer patients

Authors: Kanan Pathak, Dr. Prateek Kumar Singh , Dr. Ritu Sharma

Contact: kananxpathak@gmail.com

Country: India

Abstract: Every year, an estimated 13.9 lakh patients are diagnosed with different types of cancer, according to Indian Cancer Medical Research (ICMR). The Study explores the relationship between coping strategies and self-compassion and its effect on well-being in cancer patients. It contributes to the study that aims psychological, physical, and social surroundings in which they live can be vital for the interdisciplinary care of cancer patients. Bearing the pain of cancer is a crucial challenge for patients, and strategies they use to cope with the pain of cancer affect self-compassion and well-being. Previous studies predominantly focus on coping strategies in cancer patients to offer accounts of well-being. However, Self-compassion has received significantly less attention to explain the relationship between coping strategies and their effects on one's well-being.

Objectives: 1) The primary objective of the study is to examine the relationship between coping strategies and self-compassion, along with its effects on the well-being of cancer patients. 2) To find the correlation between self-compassion and well-being. 3) To predict from the findings regarding coping strategies and Self-compassion affect the well-being of patients.

Methods: The research includes 120 cancer patients with their ongoing treatment of Oral cancer and Lung Cancer. The participants will be selected through a convenient sampling method. Coping Strategy Inventory, Self-Compassion Scale Short Form, and well-being assessment have been used as tools and techniques to collect the data for sampling.

Expected Outcome: 5 It aims to foster a positive attitude towards the importance of self-compassion and coping strategies during the patient's difficult times by examining their role in well-being. The study anticipates discovering how self-compassion affects the patient's well-being when they are coping with cancer.

Keywords: Self-Compassion, Coping Strategies, Well-being, Cancer patients.

2.15: Others

125/T2.15/OP/57: CBT-I to Manage Insomnia: A Group Therapy

Authors: Dr Yasmin Othman Mydin, Prof. (Dr) Syed Ahmad AlMashoor, Dr. Mohamad Hashim

Contact: dryasminothman@usm.my

Country: Malaysia

Abstract: Insomnia is the most common sleep disorder experienced by individuals in general population. However, public lack awareness on therapy that can be helpful to improve insomnia symptoms. Many individuals with sleep difficulties refuse to take medication to treat the problem. Cognitive Behaviour Therapy for insomnia (CBT-I) is an evidence based therapy that is effective for sleep difficulties. CBT-I treats the root of the insomnia symptoms. CBT- I can be applied with combination of medication or all by itself depending on the severity of insomnia symptoms. The sleep difficulties may be caused by unhealthy behavior and cognitive related to sleep. The aim of the present group therapy was to investigate the effectiveness of CBT-I to manage insomnia. The treatment process focused on cognitive technique and combined with behavioural techniques such as sleep hygiene, stimulus control as a complete approach. There were nine participants aged 19 to 20 years old in the group who participated voluntarily. The participants were recruited based on mild and moderate score of Insomnia Severity Inventory (ISI), which a self-report questionnaire. ISI was used to identify insomnia

symptoms in initial session and to determine the improvement in symptoms as the therapy progressed. In the outcome of the therapy, ISI score reduced significantly for all the participants. The participants reported that all the techniques were beneficial to practice healthier sleep habits and healthier thoughts that are helpful to sleep better. They were glad to learn these techniques that they were unaware earlier. It is concluded that cognitive and behavioural techniques of CBT-I are effective in improving sleep quality.

Keywords: Insomnia symptoms, Cognitive Behaviour Therapy, adults

2.3: Advances in treatment of mood disorders and suicidal behavior

126/T2.3/OP/58: The Effectiveness of Brief Dialectical Behaviour Therapy Skills Training (DBT-ST) in managing Severe Depression in Malaysia: A Randomized Controlled Trial

Author: Izzati Mohd Bashir, Firdaus Mukhtar, Tan-Kit Aun

Contact: izzati@apu.edu.my

Country: Malaysia

Abstract: Dialectical Behaviour Therapy (DBT) is originally developed to treat suicidality in borderline personality disorder (BPD) and later has been adapted for treating a variety of mental health conditions, such as depression, binge eating disorder, and substance use disorders. DBT Skills Training (DBT-ST) is a component of DBT that teaches four core sets of skills: mindfulness, distress tolerance, emotional regulation, and interpersonal effectiveness. DBT-ST has become increasingly used as a stand-alone treatment to treat borderline personality disorder. To date, no research has yet evaluated the effects of brief group DBT-ST in treating BPD in Malaysia. This study aimed to assess the effectiveness of a brief group DBT-ST in reducing borderline symptoms amongst patients with BPD in Malaysia. Participants are 150 individuals diagnosed with BPD who will be randomly assigned to either the brief group DBT-ST or Treatment-As-Usual (TAU) (i.e. pharmacotherapy). The brief group DBT-ST will be conducted over eight weeks, focusing on core DBT skills such as mindfulness, emotion regulation, distress tolerance, and interpersonal effectiveness, tailored to a brief format. The TAU group is defined as individuals receiving psychiatric treatment which involves pharmacotherapy. Both groups will be assessed using validated measures of borderline symptoms and frequency of self-harm level at baseline, post-intervention, and at three-month and six-month follow-up. Analyses will be run in per-protocol (PP) and intention-to-treat (ITT) samples. We expect to see a reduction in the borderline symptoms and frequency of self-harm in brief group DBT-ST in comparison to TAU group.

Keywords: Depression, Dialectical Behavior Therapy, Cognitive Behavior Therapy, Randomized Controlled Trial, Brief Intervention.

2.14: CBT for suicide and postvention service

129/T2.14/OP/60: Development and pilot testing of Comprehensive Psychological Autopsy: Structured Interview Schedule

Authors: Sanya Gaur, Dr. Chittaranjan Behera, Dr. Sujata Satapathy

Contact: sanyagaur2351993@gmail.com

Country: India

Abstract: Introduction: With the increasing prevalence of suicide in India and the lack of a reliable instrument for evaluating the personality and behavioural characteristics of individuals who have committed suicide, there is an urgent requirement to develop a comprehensive schedule for assessing the personality and behaviour of suicide completers.

Objective: The primary objective of this study is to develop a Comprehensive Psychological Autopsy: Structured Interview Schedule.

Methods: Only those cases were included which were autopsied at the Department of Forensic Medicine and Toxicology AIIMS, New Delhi then Suicide survivors were interviewed for generating theme of the scale which was done only on consenting relatives above 18 years of age.

Qualitative research method of Key Interviews with 3 group participants (Forensic experts, mental health professionals and Social workers) and in-depth interview with 200 suicide survivors was conducted along with item pooling from existing tools. Scale domain and sub-constructs were identified through thematic analysis of the qualitative data and statements extracted through item pooling. Content validity was obtained followed by the administration of the schedule on pilot sample of 30 suicide deaths meeting selection criteria of the study.

Results: 6 domains of Comprehensive Psychological Autopsy: Structured Interview schedule were identified (i.e. General Behaviour description [GB]; Predominant mood in General and 15 days prior to death [PM]; General coping behaviour [CP]; Interpersonal Relationship [IR]; Reflective Mental Status of deceased [RMS]; Psychopathology [P]) which was constructed in the form of 79 statements across 6 domains on a 3-point Likert (“Yes”; “Can’t say” and “No”). The scale was found to be having high reliability with Cronbach’s alpha (0.8). and average inter-item and inter-domain correlation. Modification of scale items based on pilot study findings and expert feedback analysis done to obtain a final scale containing 65 items.

Conclusion: To our knowledge, this is the first structured schedule for conducting psychological autopsy. available in English language, the scale provides a quick measure of across multidimensional functioning.

Keywords: Suicide, Structured Interview Schedule, Psychological Autopsy, Thematic Analysis, Scale development, psychopathology

2.15: Others

132/T2.15/OP/62: Effect of COVID-19 Pandemic on suicidal Deaths in South and South-East Districts of Delhi, India

Author: Kumkum Singh, Dr. Chittaranjan Behera, Dr. Ravneet Kaur

Contact: singhkumkum9@gmail.com

Country: India

Abstract: Background: Suicide is an important public health issue and a major cause of death globally. In 2021, National Crime Records Bureau reported 164,033 suicide deaths in India. The COVID-19 pandemic had a significant impact on mental health and has been linked to increased suicide deaths worldwide. The pandemic caused stress, anxiety, uncertainty; financial crisis and social isolation that may have contributed to increased risk of suicide. Few studies

have provided actual data assessing the trend in suicide deaths during the COVID-19 pandemic worldwide.

Aim: To assess the change in pattern of suicide deaths following the COVID-19 pandemic as compared to previous years.

Methods: We studied the suicide deaths during the COVID-19 Pandemic (1st April 2020-31st March 2023) by using a structured proforma, suicide notes, and treatment records, including COVID-19 status of the suicide completers. The data were compared with the suicide data of previous three years i.e. Pre-COVID period (1st April 2017- 31st March 2020),retrieved from the archives of Department of Forensic Medicine, AIIMS.

Results: The total number of suicide deaths during pandemic (2020-2023) was 1,488, as compared to 1,433 suicidal deaths in the pre-COVID period (2017-2020). Mean number of deaths per month in the post-COVID period was 41.3 as compared to 39.8 in the pre-COVID period.

The median (IQR) age of the suicide-completers in the pre and post-COVID period [28.0(8) and 28.0(10)] respectively. Majority were male 986 (68.8%) and 1,064 (75.4%) in the pre and post-COVID period respectively ($\chi^2=0.09$, $p=0.76$). The most common causes of death was hanging (95.1% in the pre-COVID period and 94.1% in the post-COVID period), followed by poisoning (4.3% and 4.6%). There was no significant difference in availability of suicide note [58(4.0%) vs 97 (6.9%), $\chi^2=1.71$, $p=0.19$]. However, there was significant difference in the proportion of suicide-completers who had h/o previous suicide attempt [2(0.1%) vs 78(5.6%); $\chi^2=74.1$, $p<0.001$]; physical illness [48(3.3%) vs 113(8.1%); $\chi^2=26.6$ $p<0.001$], and substance abuse [21(1.5%) vs 226 (16.2%); $\chi^2=170$, $p<0.01$]in the post-COVID period as compared to pre-COVID period.

Conclusion: We did not find any significant difference in the magnitude of suicide deaths; however, there was a significant change in the pattern of suicide deaths in terms of previous attempt, physical illness and substance abuse in the post-COVID period as compared to pre-COVID.

Limitations: This data was retrieved from Post-mortem reports, hence some variables like physical illness, previous attempt and substance abuse and they may be under reported.

Keywords: Suicide, Psychological Autopsy, COVID-19 Pandemic, Suicidal Deaths, Risk Factors

2.4: CBT for Women & Reproductive Health

146/T2.4/OP/66: The Effect of Culturally Adapted Cognitive Behavioral Therapy Based Guided Self-Help in Patients with Postnatal Depression

Author: Rabia Kareem, Muhammad Irfan

Contact: drabiakareem@gmail.com

Country: Pakistan

Abstract: Background: Postnatal depression is a very common occurrence but often ignored and this becomes the major contributor to the poor quality of life in these women.

Objective: To determine the efficacy of Culturally Adapted Cognitive Behaviour Therapy based Guided Self Help (CaCBT-GSH) for depression in patients with Post Natal Depression (PND) when added to Treatment As Usual (TAU), compared with TAU alone.

Methodology: This was an assessor-blinded, randomized controlled clinical trial. Participants with a diagnosis of Post Natal Depression, coming to a teaching hospital of Karachi - Pakistan, were included in the study. A total of 140 patients were screened out and were randomly allocated 70 to CaCBT based guided self-help [Treatment group] and 70 to TAU alone [Control group]. Assessments were completed at baseline and the end of therapy (after 8 weeks from baseline). Reduction in depression score (Edinburgh Postnatal Depression Scale) at eight weeks was the primary outcome measure. The secondary outcome measures included somatic symptoms (Bradford Somatic Inventory), disability (World Health Organization Disability Assessment Schedule) and satisfaction with the treatment.

Results: A total of 70 participants were randomized to the Treatment group and the other 70 to the Control group. Participants in the Treatment group showed statistically significant improvement in depression ($p=0.000$), somatic symptoms ($p=0.000$), and disability ($p=0.000$).

Discussion: Guided Self-help based on CaCBT can be useful in improving depressive symptoms when compared with Treatment as Usual alone. This is the first report of a trial of culturally adapted CBT based Guided self-help (CaCBT-GSH) using a manual, in secondary care for patients with postnatal depression, from South Asia. Further studies are needed to generalize these findings.

Conclusion: Culturally adapted CBT based guided self-help can be effective in improving depressive symptoms in patients with Post Natal Depression when compared with treatment as usual.

Learning objective(s): 1) To find out the efficacy of a culturally adapted Cognitive Behaviour Therapy-based Guided Self Help (CaCBT-GSH) for postnatal depression. 2) To find the improvement in Somatic symptoms and Disability in women with postnatal depression who received CBT. 3) To find out the satisfaction with treatment in women with postnatal depression who received CBT.

Keywords: Culturally adapted Cognitive Behaviour Therapy (CaCBT), Guided Self-Help, Postnatal Depression.

2.7: CBT for chronic and specific medical conditions

149/T2.7/OP/68: The Effect of Culturally Adapted Cognitive Behaviour Therapy Based Guided Self-Help in Patients with Myocardial Infarction Having Depression: A Randomised Controlled Trial

Author: Dr. Mifrah Rauf Sethi

Contact: mifrahrauf@gmail.com

Country: Pakistan

Abstract: Background: Patients with cardiovascular diseases commonly have major depression and anxiety disorders. Symptoms of anxiety and depression are the leading cause of mortality in them.

Objective: To determine the efficacy of a culturally adapted Cognitive Behaviour Therapy-based Guided Self Help (CaCBT-GSH) for depression in patients with myocardial infarction (MI) when added to Treatment As Usual (TAU), compared with TAU alone.

Method: This was an assessor-blinded, randomised controlled clinical trial. Participants with a diagnosis of depression post myocardial infarction, coming to the Punjab Institute of Cardiology in Lahore, Pakistan, were included in the study. A total of 140 patients were

screened; 70 of them were randomly allocated to CaCBT-based guided self-help plus TAU (Treatment group) and 70 to TAU alone (Control group). Assessments were done at baseline and at end of therapy (8 weeks from baseline). Reduction in depression score (Depression Subscale of the Hospital Anxiety and Depression Scale (HADS) at eight weeks was the primary outcome measure. The secondary outcome measures included anxiety scores (HADS - Anxiety Subscale), depression scores (HADS - Depression Subscale), somatic symptoms (Bradford Somatic Inventory), disability (World Health Organisation Disability Assessment Schedule) and treatment satisfaction.

Results: Participants in the Treatment group (n=70) showed statistically significant improvement in depression, somatic symptoms, and disability (p=0.000). Participants in the Treatment group also reported higher satisfaction with treatment compared to those in the Control group (p<0.01).

Conclusion: Culturally adapted CBT-based guided self-help can be effective in improving depressive symptoms in patients with myocardial infarction when compared with treatment as usual.

Keywords: Culturally adapted Cognitive Behaviour Therapy (CaCBT), Guided Self-Help (GSH), Myocardial Infarction (MI), Depression.

2.15: Others

150/T2.15/OP/69: Integrating CBT and IPT Therapies to enhance treatment for Depression: A Case Series

Author: Mubashra Tayyaba

Contact: mubashratayyaba786@gmail.com

Country: Pakistan

Abstract: The aim of this study was to evaluate the effectiveness of Cognitive Behavioral Therapy (CBT) alongside Interpersonal Psychotherapy (IPT) in the treatment of depression disorders in Pakistan. A total of 28 clients diagnosed to have depression disorder were included in this contextual investigation. They were assorted regarding age, gender, and financial foundations. They went through Intervention program that integrated CBT and IPT procedures. The sessions were led via CBT therapist and mental health practitioner who followed an organized treatment convention. Quantitative measures, for example, the Beck Depression Inventory was utilized to evaluate the severity of depression symptoms at pre-and post-intervention. Moreover, subjective information, acquired through interviews and open-ended questionnaires. Preliminary results demonstrated a critical decrease in the symptoms of depression in post-intervention. Clients reported improved emotional regulation, enhanced interpersonal relationships, and increased acceptance of negative emotions. The study emphasized the importance of culturally adapting CBT techniques to better suit the Pakistani population. Factors such as religious beliefs, social norms, and cultural values were taken into consideration during the therapy sessions. This culturally sensitive approach guaranteed that the clients could connect with the restorative procedures and connect completely in the treatment cycle. The outcomes add to the current literature on the utilization of CBT and IPT in socially assorted settings and give experiences to emotional wellness experts hoping to foster more powerful treatment procedures for depression disorder in Pakistan. Further research with

larger sample sizes is recommended to validate these findings and potentially inform policy and practice in mental health interventions in Pakistan.

Keywords: CBT, IPT, Depression disorders, Pakistan, Treatment

2.15: Others

153/T2.15/OP/71: Social Anxiety as Related to Academic Achievement of the Students at the Higher Secondary Level of Rajshahi Metropolitan City

Author: Alpona Karmakar, Dr. Murshida Ferdous Binte Habib

Contact: alpona20ak@gmail.com

Country: Bangladesh

Abstract: This study investigates the relationship between social anxiety and academic performance among high school students in the Rajshahi Metropolitan area. It highlights the significance of academic achievement in college students' lives, particularly during the socially vulnerable adolescent stage. Social anxiety, often linked to negative self-perception and impaired social interactions, can heighten the risk of exam failure. With limited research on social anxiety's impact on academic success in Bangladesh, this study aims to bridge the gap and explore potential differences based on gender, socioeconomic status, and family type. This study involved 600 purposefully selected students (300 male and 300 female) from various colleges in Rajshahi Metropolitan City. It utilized the Bengali Version of the Social Anxiety Scale for Adolescents. Academic achievement was measured using Secondary School Certificate (SSC) results, treated as the dependent variable, while social anxiety was the independent variable. Data collection involved obtaining permission from college principals, establishing rapport with students, ensuring confidentiality, and gathering personal information. Statistical methods were applied for data analysis. The study established a negative correlation between social anxiety and academic achievement, supporting the hypothesis. Gender differences in achievement were confirmed, and socioeconomic status and family type significantly influenced academic performance. The main effect of social anxiety on achievement was also validated, emphasizing its impact. The conclusion of the study found there was a negative correlation between social anxiety and academic achievement. Future applications of Cognitive Behaviour Therapy include school-based, parental, and teacher training, community outreach, online interventions, tailored approaches, policy changes, professional collaboration, and peer support programs to address social anxiety's impact on academic performance. This research emphasizes the collaborative efforts of educational planners, parents, and students in enhancing academic performance and mental well-being. It stresses the importance of early detection, mental health awareness, tailored support, community collaboration, policy advocacy, peer support, evaluations, and ongoing research to address social anxiety's impact on academic success. Further studies may be conducted on a large sample to make decisions regarding these issues and can also apply cognitive Behaviour Therapy. Despite these limitations, the finding of the study provides basic foundations for future researchers in this field.

Keywords: Social Anxiety, Theory of social anxiety, Academic achievement, Adolescence

2.9: CBT for Cancer, pain management, and Palliative care

155/T2.9/OP/72: Brief Cognitive Behaviour Therapy for Chronic Pain Patients in University Kebangsaan Malaysia Medical Centre: A Preliminary Report

Author: Wichitra Phon, Dr. Mahadir Ahmad, Dr. Nadia Md. Nor, Dr. Farizal Fadzil, Dr. Ramesh Kumar Athi Kumar, Nur Syazwani Chamhuri

Contact: wichitrasisuwan@gmail.com

Country: Malaysia

Abstract: Despite the advancements in research in Western nations, chronic pain management using psychological methods in Southeast Asia, particularly Malaysia, is still lacking. The purpose of the study is to assess the effectiveness of brief Cognitive Behaviour Therapy (bCBT) for patients with chronic pain at Universiti Kebangsaan Malaysia Medical Centre (UKMMC). In this study, three participants received bCBT treatment that focuses on pain severity, functioning, Quality of Life (QoL), and psychological well-being. The study uses a multi-method case study design. The results were analysed through both quantitative and qualitative methods. Six weekly sessions of an hour each were used to carry out the intervention, which consisted of psychoeducation, relaxation, cognitive restructuring, and activity pacing. Improvements were seen for anxiety, while pain severity, functioning, and QoL only showed minor improvements. Participants who experienced pain for shorter periods and who had fewer co-morbid conditions demonstrated better improvements. Based on the interview conducted, the participants preferred relaxation and psychoeducation. Otherwise, it is a safe intervention and worth applying in primary care settings.

Keywords: Chronic pain, CBT, Southeast and East Asia

2.1: CBT for Child & Adolescent issues

160/T2.1/OP/74: Imagery-Based Cognitive Behavioral Therapy for Homesickness in a New Military Cadet: A Case Report

Author: Poomwit Puttakiaw

Contact: feempoomwit@gmail.com

Country: Thailand

Abstract: Objective: Homesickness is a common challenge among new military cadets, often manifesting as emotional distress, anxiety, and difficulty adapting to a new environment. This case report examines the effectiveness of Imagery-Based Cognitive Behavioral Therapy (I-CBT) as an intervention for a cadet experiencing severe homesickness.

Methods: The subject, a 16 year-old male cadet newly recruited into military academy, presented with symptoms of acute homesickness, impacting his training performance and psychological well-being. A tailored 8-week I-CBT program was initiated, comprising imagery exercises, cognitive restructuring, and behavioral interventions.

Results: Post-intervention assessments showed a significant reduction in the cadet's symptoms of homesickness, with improved mood, enhanced coping strategies, and better social

integration within the military environment. The cadet reported a decrease in the frequency and intensity of homesickness episodes, suggesting that I-CBT may be an effective tool for emotional regulation and adaptation in new cadets.

Conclusion: Imagery-Based Cognitive Behavioral Therapy appears to be a promising approach for addressing homesickness in military cadets, facilitating better adjustment to the demands of military life. Further research with a larger sample size and control groups is recommended to validate these findings.

Keywords: Homesickness, Military Cadets, Imagery-Based Cognitive Behavioral Therapy, Emotional Distress, Adaptation, Military Training, Psychological Intervention

2.14: CBT for suicide and Postvention services

161/T2.14/OP/75: Developing A Suicide Prevention Training Manual for Dhaka University Students Based on Cognitive Behavior Therapy

Author: Tahmida Nusrat, Jobeda Khatun

Contact: tahmida.nusrat143@gmail.com

Country: Bangladesh

Abstract: The present study aimed to develop a therapist's manual for providing suicide prevention training to Dhaka University students based on cognitive behavior therapy. For this purpose, the steps followed were groundwork, preparing the first draft, judge evaluation, and final draft. The groundwork included understanding the concept of suicide, literature review, need assessment and expert interviewing. The need assessment was conducted through a semi-structured focus group discussion with a group of practitioners who worked with suicidal cases. In-depth interviews were set with clients with prior suicide attempts. Experts from different mental health professions, such as psychiatrists, clinical psychologists, and counseling psychologists were interviewed using a semi-structured method following a topic guide. All information was compiled for a thematic analysis and developing content for the manual. The identified common problems among suicidal students were poor coping skills, negative automatic thoughts, hopelessness, emotion dysregulation, lack of problem-solving and emergency management skills, and absence of goal-directed behavior. In response to these needs, an initial draft of the manual was developed to address these challenges. Then its language fluency, content, sequence, and time management were evaluated by 11 judges. The final draft accumulated all the findings and was planned for piloting.

The manual consisted of four weekly sessions of two-hour duration. The first session included psychoeducation on mental health, suicide, cognitive behaviour therapy, the five-factor model, and emergency management. The second session covered the cognitive model of suicide, negative automatic thought and cognitive distortion identification, emotion regulation skills, and reasons for living. The third session comprised thought challenge and modification, coping thoughts, and breathing relaxation. At last, the final session consisted of the skills of problem-solving and life goal setting. In conclusion, this CBT-based training manual might be electively used as a primary or secondary suicide prevention program for Dhaka University students.

Keywords: Suicide Prevention, Training Manual, Dhaka University Students, Cognitive Behavior Therapy

2.13: CBT for caregivers of patients of chronic and terminal health conditions

162/T2.13/OP/76: Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) for traumatic stress symptoms in parents of infants with chronic medical conditions: A single-subject, multiple baseline study

Author: Sunthariya Leelasangjai, Sirirat Ularntinon, Thiraporn Tangjitiporn, Amornpun Singhapol

Contact: bowww33@gmail.com

Country: Thailand

Abstract: Objective: This study was conducted with the primary objective of empirically assessing the efficacy of Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) in ameliorating stress experienced by parents of infants afflicted with chronic medical conditions. Method: A research design employing a single-subject, multiple baseline approach was utilized to rigorously scrutinize the effects of TF-CBT on parental stress, anxiety, and depressive symptoms in the context of caring for infants with enduring medical conditions. The assessment instruments employed in this study encompassed the Parental Stressor Scale: Pediatric Intensive Care Unit (PSS:PICU), Thai Hospital Anxiety and Depression Scale (Thai HADS), Post-Traumatic Stress Disorder Checklist (PCL), and Patient Health Questionnaire (PHQ-9). In addition, we conducted in-depth interviews to enhance the qualitative dimension of our investigation.

Results: Ten parents initially participated in the study, and six successfully completed it. Following their engagement with TF-CBT, a statistically significant reduction in their stress levels, anxiety, and proclivity towards depressive symptoms was discerned. In the in-depth interviews, recurring themes, including apprehension regarding the uncertain trajectory of their infants' medical condition, challenges in interpersonal relationships, and feelings of guilt, emerged.

Conclusion: The findings of this study underscore the effectiveness of TF-CBT in mitigating stress, anxiety, and depressive symptoms among parents who are tasked with the demanding responsibility of caring for infants enduring chronic medical conditions. For future research and practical applications, the introduction of group-based TF-CBT interventions is recommended to facilitate a more comprehensive and interactive approach in addressing the recurring themes identified in this research.

Keywords: Trauma-Focused Cognitive Behavioral Therapy, traumatic stress, chronic medical conditions, parents of infants

2.12: CBT based family and marital therapy for mental illnesses

163/T2.12/OP/77: Gender Role Orientation as a Predictor of Marital Adjustment

Author: Priyanka Sarkar, Arifa Rahman

Contact: priyanka-2015517676@cpsy.du.ac.bd

Country: Bangladesh

Abstract: Married individuals are likely to experience more mental health issues compared to others. Protective factors foster resilience and play a role in shaping our belief system that can be productive for couples in the face of adversity. Exploring what factors may contribute as resources for better adjustment in marriage can bring a new perspective to our mental health programs. Sandra Bem (1981) proposed in gender schema theory that a person's gender typing is acquired through schematic processing and associated with coping abilities and adaptability which may impact one's marital adjustment. However, there is a shortage of data from our Bangladeshi culture in that area. The present study emphasized the research gaps and intended to understand better the factors that influence marital adjustment of couples. We used a cross-sectional survey design to investigate the effect of gender role orientation (masculine, feminine, androgynous, undifferentiated) on marital adjustment. Convenience sampling method was used to collect the data. 240 adult married participants completed Bangla Bem-Sex Role Inventory (BSRI) and Revised Dyadic Adjustment Scale (RDAS). Hierarchical regression analysis revealed that gender role orientation explained 37.9% of the variance in marital adjustment. But gender wasn't a significant predictor of marital adjustment. Androgynous respondents (100%) displayed non-distressed relationship compared to masculine and feminine respondents, and undifferentiated respondents (86.4%) displayed distressed relationship which was much higher than others. The implication of this paper suggests to researchers, marital therapists, and mental health practitioners to consider gender role orientation as a significant aspect in conceptualizing the marital adjustment of couples.

Keywords: Gender Role Orientation, Marital Adjustment

2.2: New trends in CBT for Anxiety disorders

164/T2.2/OP/78: Network Analysis of Obsessive-Compulsive Disorder (OCD) Following the COVID-19 Pandemic

Authors: Roxana Oltean (Cardoş), Oana David

Contact: roxanaoltean@psychology.ro

Country: Romania

Abstract: The outbreak of the COVID-19 pandemic has had a profound impact on the global population. Psychological disorders, such as Obsessive-Compulsive Disorder (OCD), have shown an alarming increase during this period. To better understand the dynamics and interconnectedness of OCD symptoms in the post-pandemic era, this research paper aims to conduct a network analysis of OCD symptoms and explore their associations and potential drivers. The study employs a comprehensive dataset comprising self-reported measures of OCD symptoms, risk, and resilience factors collected from a diverse population following the COVID-19 pandemic. Network analysis is employed as a tool to explore the interrelationships among symptoms and risk and resilience factors. The analysis also investigates the possible influence of pandemic-related factors on the structure and connectivity of the OCD symptom network. Preliminary findings (N=400) reveal intriguing patterns within the OCD symptom network, suggesting both existing and novel connections among symptoms. This research contributes to the understanding of how the COVID-19 pandemic may have influenced the presentation and structure of OCD symptoms. The findings may shed light on the underlying

mechanisms of OCD, highlight the significance of pandemic-related factors in symptomatology, and aid in the development of targeted interventions and treatment approaches for individuals affected by OCD in the aftermath of the pandemic.

Keywords: OCD, network-analysis, COVID-19

2.5: CBT treatment for substance abuse and addictive behaviours

166/T2.5/OP/79: Exploring the Psychosocial Factors of Persons Whom Inject Drug (PWID) Experienced by the Counselors in Drop-in Centers (DIC)

Author: Saima Akther

Contact: saimaakther28@yahoo.com

Country: Bangladesh

Abstract: The PWID project, run by CARE Bangladesh, is a comprehensive HIV prevention initiative aimed at preventing HIV among injectable drug users in Bangladesh. Thirteen district-based Drop-in Centers (DIC) are managed by CARE Bangladesh. Usually, the counselors of these centers are dealing with clients to motivate them and ensure adherence to the services. Based on the need of the program, the psychosocial factors were explored to develop the capacity of the counselors. A qualitative study was done to explore the psychosocial factors of injective drug users in DIC. A semi-structured interview was conducted with a counselor. The questions were evaluated by six judges who have experience in dealing with drugs. After that, an in-depth interview was done. The participants were from different districts of Bangladesh. The number of participants were nine (9). The thematic analysis was done to understand the psychosocial factors of the target population. The core themes are difficulties of adherence, socio-economical and legal issues, mental health problems and interventions and expertise of counselors. Difficulties of adherence refer to myths related to OST and ART, perceptions about service, and problems related to motivations. Socio-economic and legal issues are related to those factors which are related to real-life difficulties, family, and social context. Mental health problems are related to the understanding of mental health and drug-based treatment among the target population and counselors. The expertise of counselors refers to exploring the existing training and capacities to deal with specific target groups.

Keywords: PWID, Psychosocial factors, DIC

2.1: CBT for Child & Adolescent issues

167/T2.1/OP/80: Motivational factors enhancing effective emotion regulation among adolescents

Author: Rehnuma Pervin Nijhum, Farah Deeba

Contact: rehnumapervinnijhum@gmail.com

Country: Bangladesh

Abstract: Emotion regulation is the skills and methods required to influence and regulate adolescents' emotional experiences as their emotional life differ from other stages. It is assumed

to be an essential factor in adolescents' mental health, well-being, and successful functioning. It significantly influences emotional and behavioural disorders in children and adolescents. People are prone to behave in a way that leads to desirable outcomes; it is hypothesized that adolescents' motivation to change maladaptive emotion regulation may have an impact on increasing effective emotion regulation and mental health. The main goal of the present study was to investigate the interplay between adolescents' motivation to change, emotion regulation, and mental health. Specifically, we wanted to see if the motivation to change significantly impacts effective emotion regulation and if the motivation to change and mental health can predict emotion regulation. Besides exploring gender differences for emotion regulation, motivation to change, mental health, and emotion regulation subscale scores of adolescents. To accomplish the goals of the research, cross-sectional survey design was employed, and 250 adolescents between the ages of 12 and 18 were selected for the study using a convenient selection method. All the participants filled out three questionnaires, which are the Cognitive Emotion Regulation Questionnaire (CERQ), the University of Rhode Island Change Assessment Scale (URICA), and the Strengths and Difficulties Questionnaire (SDQ). Multiple linear regression analysis were done to identify the predictors, and an independent sample t-tests were used to see the gender difference among all variables' scale scores and sub-scales of emotion regulation. The study results revealed that, in combination, motivation to change, mental health strength scores, and mental health difficulties scores significantly predicted effective emotion regulation, and as a unique independent variable, motivation to change significantly predicted effective emotion regulation. The results also showed that there is no noteworthy gender difference between males and females regarding scores. The findings of this study have implications for planning adolescent intervention programs to increase motivation to change maladaptive emotion regulation. Since less adaptive emotion regulation is a risk factor for developing mental health difficulties in the future, techniques and more research to increase effective emotion regulation need to be incorporated.

Keywords: Emotion regulation, mental health

2.15: Others

171/T2.15/OP/82: Preliminary Validation of a Clinical Measure for Evaluation and Treatment Planning in Adult ADHD

Authors: Sharon Suganthi Caroline S, Paulomi M Sudhir, Thennarasu, Vivek Benegal, Urvakhsh Mehta,

Contact: sharosam22@gmail.com

Country: India

Abstract: Background: Adults with ADHD have a more diverse set of deficits than children in higher order executive functioning and emotional control.

Aim: To develop a clinical measure to capture varying clinical presentations and functioning among adult ADHD.

Methods: This study adopts an exploratory mixed methods approach. The qualitative phase of the study involved item generation followed by content validation. Key informant interviews (n= 13) were carried out with mental health professionals, individuals with a diagnosis of adult ADHD and their significant others. A predominantly inductive/data-driven approach was

adopted for coding the transcripts. Qualitative software Atlas ti was utilized for the first and second cycle of coding, code networks, generating themes and analytic memos. Intercoder reliability was carried out to accentuate the accuracy and reliability of the codes generated and Cohen's kappa reliability was established. Content validation was then carried out with mental health experts and adults with ADHD who were part of the KIIs.

Results: The iterative process of item generation and qualitative analysis led to 119 items across 21 domains. Upon completion of reviewing domain and items, the experts (n=10) were requested to provide score on each item independently based on its relevance to the domains and the overall construct. Content Validity Index based on the relevance of items revealed a S-CVI/Ave (based on I-CVI) = 0.945 and S-CVI/Ave (based on proportion relevance) = 0.94. CVR based on essentiality of items and Lawshe's technique (1975) revealed 61 items as appropriate, 34 items needed revision and 24 items were redundant.

Conclusion: Manifestation of adult ADHD other than the core triad symptoms as evidenced in the literature has been procrastination, certain attentional regulation deficits such as mind wandering, boredom proneness and hyperfocus as an attentional deficit disorder and other associated social functioning difficulties and functional impairments. As most of our understanding of ADHD remains grounded in the conceptualization of it being a childhood disorder, it is imminent to understand how ADHD might manifest in adulthood. Early identification and evaluation would favour a transdiagnostic approach in the management of ADHD in adults, blending approaches such as psychoeducation, CBT, DBT components and mindfulness-based approaches. Hence, this clinical measure aims to guide the clinicians on varying manifestations and formulation of treatment goals.

Keywords: Attention Deficit Hyperactivity Disorder, Clinical measure, Treatment planning, Adulthood

2.7: CBT for chronic and specific medical conditions

177/T2.7/OP/87: A Quantitative Study on the Relationship among Cognitive Distortion, Chronic Pain and Somatic Symptoms in it Employees in Chennai

Author: Vidhya S, Swetha K, Dharini Sree N

Contact: sdvidhya2@gmail.com

Country: India

Abstract: Psychosomatic symptoms such as headache, muscle pain, elevated heart rate has been associated with psychological distress. Cognitive distortion is an important factor in the etiology, maintenance, and exacerbation of many psychological disorders. The study conducted by Timothy W smith et al (Timothy et al., 1986) on Cognitive distortion and disability in chronic low back pain found that cognitive distortion was consistently related to several aspects of disability. The cognitive variables accounted for variance in disability beyond that accounted for by severity of pain, number of pain treatments, and depression. Higher levels of cognitive distortions is associated with more stress. Stress in turn exacerbates the somatic symptoms. A review by Etienne Vachon-Preseau notes that chronic pain patients have been shown to exhibit maladaptive stress responses in general and in response to pain. This study aims to establish relationship among cognitive distortion, chronic pain and somatic symptoms. This can help to create more holistic approach in treating psychosomatic symptoms

and alleviation of chronic pain through techniques of CBT focusing on targeting cognitive distortions. The study will be conducted at an estimated sample of 200 IT employees working in Chennai through snowball sampling technique. Cognitive Distortions Questionnaire (CD-Quest), Chronic Pain Grade Scale (CPGS) and The Somatic Symptom Scale (SSS-8) will be administered to measure cognitive distortions, intensity of chronic pain and somatic symptoms respectively. The results and the conclusion of the study will be discussed in the full paper.

Keywords: cognitive distortion, chronic pain, somatic symptoms, IT employees, Chennai

2.1: CBT for Child & Adolescent issues

178/T2.1/OP/88: The Fortress Game: a pilot study of a therapeutic board game in promoting mental health in children and adolescents

Authors: Roxana Oltean (Cardoş), Elisa Dumitru, Ion Milea

Contact: roxanaoltean@psychology.ro

Country: Romania

Abstract: Sustained efforts are needed to improve the widespread implementation of mental health prevention strategies among children and adolescents. The Fortress therapeutic board game was designed to offer a theory-based independent prevention tool that can develop psychological resilience and reduce emotional problems in children and adolescents. The aim of the present study was to investigate the efficacy of the Fortress therapeutic board game, to promote mental health in children and adolescents. Therefore, 119 children and adolescents aged between 10 and 16 years were randomly assigned to one of the two groups: 59 participants in the game condition, and 60 participants in the waitlist condition. Results indicated that the Fortress game had a significant impact on decreasing irrational cognitions levels and developing positive emotions and satisfaction with the intervention. In conclusion, the implications of the Fortress game are discussed in relationship with resiliency-building programs designed for youths.

Keywords: board-game, prevention, child, adolescent

2.1: CBT for Child & Adolescent issues

180/T2.1/OP/89: A Cross-Sectional Study on Cognitive Emotion Regulation, Anxiety and Depression among Early Adolescents

Author: Jaimathisa. A, Siva B, Sanjay R

Contact: jaimathisa.a@gmail.com

Country: India

Abstract: Cognitive emotion regulation strategies play an important role in the emotional well-being and mental health of adolescents, as this is a critical period in human development where emotional regulation skills are still developing (Extremera, N., 2019). The aim of the study is to examine the relationships of cognitive emotion regulation with anxiety and depression symptoms in the sample of early adolescents in Chennai. The study uses a cross sectional

research design with a sample of 200 early adolescence. The inclusion criteria include the students (1) studying 9th and 10th std and in the age of 13 to 15 years (2) studying in government school in Chennai (3) ability to read and write in English. Cognitive Emotion Regulation Questionnaire (CERQ) developed by Garnefski, N. et al (2001) which consists of nine subscales, is used to measure the cognitive aspects of emotion regulation. The Patient Health Questionnaire - Anxiety and Depression Scale (PHQ-ADS) developed by Kroenke, K. et al (2016) is used to measure the level of anxiety and depression symptoms. Pearson's Correlational Analysis evaluates the relationships among the variables and Hierarchical Regression Analysis determines the relationships of CERQ subscales with anxiety and depression, in two steps, (1) the demographic variables are entered in the first block to control for their effects on anxiety and depression (2) the nine CERQ subscales is entered in the second block. The results will reveal the different cognitive emotional regulation strategies used by early adolescents who are under different degrees of anxiety and depression. The findings will imply the use of cognitive behavioral therapy focusing on cognitive emotion regulation among early adolescents. Further discussion will be revealed in the full paper.

Keywords: Cognitive Emotion Regulation, Anxiety, Depression, Early Adolescents

2.15: Others

181/T2.15/OP/90: Cognitive Distortions and Their Mediating Role on Loneliness among University Students: A Mixed Research Study

Author: Siva B, Jaimathisa. A, Sanjay R

Contact: thedarkspire001@gmail.com

Country: India

Abstract: Beck (1967) has argued that cognitive distortion, that is, the tendency to misconstrue or distort the significance of events in a way that constitute a negative view of the self, the environment, and the future, plays a central role in the development and maintenance of depression. Cognitive distortions that a lonely person possesses are perceived as the fundamental reason for their experience of loneliness (Burns, 1985). The present study is aimed at finding the relationship between cognitive distortions and loneliness among university students. This study will consist of 300 college students attending different universities in Chennai, where the data will be collected using the convenience sampling method. The study will employ a sequential explanatory research design and be conducted in two phases. Phase I will be a cross-sectional study to determine the relationship between cognitive distortions and loneliness. The data will be collected using the Cognitive Distortion Questionnaire (CD-Quest) developed by de Oliveira (2015), and the UCLA loneliness scale, developed by Russell, D (1996). Phase II will be explanatory qualitative research to understand the causal factors of loneliness among university students. This phase would include 10 students. Five participants each will be chosen among those who have been rated high and low on the loneliness scale during phase 1. The data will be collected through a semi-structured interview using purposive sampling. The results would reveal the difference between the cognitive distortions used among individuals with different levels of loneliness. The findings might imply the use of cognitive behavioral therapy interventions focusing on various cognitive distortions relating to loneliness. This study could be seen as adding work for future studies on similar topics.

Keywords: Cognitive distortions, Loneliness, University Students, Young Adults

2.15: Others

183/T2.15/OP/93: Effects of CBT on self-esteem, body dissatisfaction and psychological distress on females with PCO

Author: Aadhithya M, Pujitha M, AR Rakshena

Contact: 21.aadhithya@gmail.com

Country: India

Abstract: Introduction: Given the increasing Prevalence and complications (Deswal, 2020) caused by the polycystic ovary, adolescents between the ages 18 and 25 go through hormonal and metabolic changes in their bodies (Kri, 2017). As a result, they develop low self-esteem, body image dissatisfaction and psychological distress (Tay, 2019).

Aim: This study will be conducted to determine the effects of cognitive behavioural therapy (CBT) on self-esteem, body image dissatisfaction and psychological distress in women with polycystic ovaries.

Methods: The sample will be taken by purposive sampling method. The population of the study will be 200 females with polycystic ovaries in Tamil Nādu. The age range of the participants is between 18-35. The participants will be separated into an experimental group and a control group. The intervention group will receive 8 weeks of cognitive behavioural therapy sessions. Pre-test and post-test will be administered through the Rosenberg Self-Esteem Scale (1965), the Body Image Disturbance Questionnaire (2004) and the Kessler Psychological Distress Scale (1992). Quantitative and qualitative analysis will be used to bring the results of the research.

Expected Results and Conclusion: Cognitive behavioural therapy will increase self-esteem, and decrease body image dissatisfaction and psychological distress on females with polycystic ovaries.

Keywords: Polycystic Ovary, Self-Esteem, Body Image Dissatisfaction, Psychological Distress, Cognitive Behavioural Therapy

2.15: Others

184/T2.15/OP/94: Correlation between self-esteem, body dissatisfaction and psychological distress , social relationship on females with PCO

Author: Pujitha M, AR Rakshena

Contact: bonjourpujitha@gmail.com

Country: India

Abstract: Introduction: Given the increasing Prevalence and complications (Deswal, 2020) caused by the polycystic ovary, adolescents between the ages of 18 and 25 go through hormonal and metabolic changes in their bodies (Kri, 2017). As a result, they develop low self-esteem,

body image dissatisfaction and psychological distress (Tay, 2019) and have problems in social relationships.

Aim: To determine the relationship between self-esteem, body image dissatisfaction, problems in social relationships and psychological distress in women with polycystic ovaries.

Methods: A purposive sampling method will be used to collect data from 200 females with polycystic ovaries in Tamil Nādu within the age range of 18-35 years. The Rosenberg Self-Esteem Scale (1965), The Body Image Disturbance Questionnaire (2004), the Kessler Psychological Distress Scale (1992) and the Social Relationship Scale (1981) will be used to analyse the results.

Expected results: There will be a relationship between self-esteem, body image dissatisfaction, problems in social relationships and psychological distress in females with polycystic ovaries.

Keywords: Polycystic Ovary, Self-esteem, Body Image Dissatisfaction, Psychological Distress, Social Relationship.

2.7: CBT for chronic and specific medical conditions

194/T2.7/OP/96: Development of a Cognitive-Behavioral Therapy Module for managing the psychological distress of patients having Coronary Artery Disease

Authors: Usri Sengupta, Dr. Amool Ranjan Singh, Dr. Hemant Narayan Ray

Contact: usri.kolkata2019@gmail.com

Country: India

Abstract: Background: The current prevalence of coronary artery disease (CAD) in India is around 6.2% in men. Chronic stress releases cortisol in the human blood which leads to overactivation of sympathetic nervous system. This in turn leads to hypercoagulation and endothelial dysfunction, thereby causing hypertension which further leads to coronary artery disease.

Aim: Among the various kinds of cardiac illnesses, CAD is a subtype which is mostly caused due to stress. Hence, a cognitive-behavioral intervention module is being prepared to improve prognosis in patients having coronary artery disease. The findings of the study may help in early detection of at-risk groups, thereby reducing the mortality rate of patients having CAD by initiating early intervention.

Methodology: Crossover Design is being used in the present study to check the efficacy of the therapeutic module. Purposive Sampling is used to select 20 participants for experimental condition and 20 participants for the control condition. Participants are randomly assigned to each group. Anxiety, Depression, Stress, and Locus of control are being directly intervened upon in order to assess the impact of the psychotherapeutic module on these variables which would thereby improve the prognosis in patients having Coronary Artery Disease. Components of anxiety which are intervened upon include a sense of urgency, environmental stimulation, somatic hyperawareness, existential anxiety, and catastrophic cardiovascular outcomes. Components of depression which are intervened upon include negative affectivity, social inhibition, social support network, self-criticism, mood state, existential depression. Components of stress which are intervened include overly stressing about cardiac outcomes and physiological manifestations of stress. Components of Locus of control which are intervened upon include autonomy, sense of control and self-efficacy. The variables which are

being quantitatively assessed during baseline and post-intervention conditions but will not be directly intervened upon are Type of Personality and Subjective Well-Being. Individuals having Type-A and Type-D personalities are being chosen for the study because such individuals have maximum chances of developing CAD, owing to the pre-existing sympathetic hyperarousal. The variables which are being qualitatively assessed during baseline and post-intervention conditions include Perceived Social Support, Coping skills and Quality of Life. A six-month follow-up will be conducted after the completion of the study to assess its efficacy over a longer period.

Results and Conclusion - The findings of the study will be shared hereafter.

Keywords: Coronary Artery Disease, Cognitive-Behavioural Intervention Module, Stress, Personality, Locus of control, Subjective Well-being

2.7: CBT for chronic and specific medical conditions

198/T2.7/OP/98: An Analysis of the Lived Experience and Felt Needs of Persons with Multiple Sclerosis, and their Preferred Targets for a Cognitive-Behavioral Intervention

Authors: Sindhura Lakshmikanth, Paulomi M Sudhir, Geetha Desai, Netravathi M

Contact: sindhura216@gmail.com

Country: India

Abstract: The prevalence of MS is rapidly increasing in India and across the world, and it is the most common cause of neurological disability in young adults. The early onset of MS can significantly interfere with important life goals, and the progressive, unpredictable, and potentially disabling nature of MS can make adjustment highly demanding and a consistent source of stress. There are no studies of psychological interventions for PwMS in India, despite there being a substantial and increasing population of PwMS. The need to include patients and stakeholders in the designing of public health interventions is increasingly being advocated. There is a need to explore and tailor interventions to the lived experience, and felt needs of PwMS. This study aims to explore the lived experience and felt needs of persons with MS, and their preferred targets, components, characteristics, and structure for a cognitive-behavioral intervention. A semi-structured interview will be conducted with 20 to 30 PwMS. The interview will be guided by the Social-Cognitive Model, and the Common-Sense Model of Self-Regulation. Psychosocial needs, concerns, illness perceptions, health behaviors and their determinants will be analyzed and synthesized, and will be used to inform the framing of intervention objectives, targets, components, and techniques for a cognitive-behavioral intervention for adjustment to and coping with MS.

Keywords: Multiple Sclerosis, lived experience, felt needs, self-regulation, illness perceptions, health behaviors

2.15: Others

204/T2.15/OP/100: What makes the caregiver keep accommodating? : Understanding the interplay of patient, caregiver, and family factors in family accommodation of OCD

Authors: Archana Gupta, Dr. Ajay Kumar, Dr. Jaisoorya T.S.

Contact: archanag28515@gmail.com

Country: India

Abstract: More than 20 years after the first validated measure of Family Accommodation of OCD was developed, the role of the family in maintaining OCD symptoms is still being underrated. However, rather than a pragmatic approach to identifying and understanding the constructs and processes involved in accommodative behaviours, the focus appears to have turned towards identifying methods to reduce Family Accommodation in treatment. The current study was aimed at understanding the mechanism of maintenance of Family Accommodation comprehensively. It explores existing findings to increase confidence in the research; whilst also extending this by investigating broader, related patient, caregiver, and family variables in order to understand the process of accommodation more accurately. Using a single-group cross sectional research design, a sample of 20 participants (10 patients with OCD and 10 respective caregivers) were recruited and data regarding their symptomatology, personality traits, emotional regulation capacities and family dynamics were taken along with other clinical and socio-demographic details. Data was analysed using appropriate statistical measures including correlation and t-test. Results indicated the role of multiple factors relating to the patient as well as their caregivers in maintenance of family accommodation. The interplay of family dynamics in this relationship further enriches the existing literature and understanding of the accommodation process. A need to do an in-depth exploration of the functions served by engaging in accommodation was also observed. The study implied specific strategies for enhancing effectiveness of treatment (primarily CBT) by helping mental health professionals in assessing need for the type of management (Separate therapy advisable for the caretaker/ Structured psychoeducation/ Family based intervention) on a case-to-case basis. Along with other implications of the current study, suggestions for further research are also discussed.

Keywords: Obsessive Compulsive Disorder, Family Accommodation, Determinants of family accommodation, Interventions for OCD, CBT for OCD.

2.1: CBT for Child & Adolescent issues

206/T2.1/OP/101: An Exploration of Automatic Thoughts and Emotional Regulation among Government Boarding School Students

Authors: Jaimathisa. A, Siva. B, Sanjay. R

Contact: jaimathisa.a@gmail.com

Country: India

Abstract: Boarding schools may provide excellent academic resources but can potentially lack sufficient emotional support systems to address the needs of children experiencing homesickness, loneliness, or emotional distress (Rickman, S., 2010). The aim of the study is to

examine the relationship between automatic thoughts and emotional regulation among students in Government Boarding Schools in Chennai. This study will consist of 200 students attending different government boarding schools in Chennai, where the data will be collected using the convenience sampling method. The inclusion criteria includes the students, (1) studying 6th to 10th grade (2) boys between age of 12 to 16 years (3) ability to read and write English. The Automatic Thought Questionnaire (ATQ-30) developed by Hollon and Kendall (1980), is used to assess the frequency of negative automatic thoughts among individuals. The Emotional Regulation Questionnaire (ERQ) developed by Gross, J.J., and John, O.P. (2003), is used to assess the use cognitive reappraisal and expressive suppression strategies to regulate negative emotions. Pearson's Correlational Analysis will be conducted to examine the relationship between the two variables. The results would reveal the different emotional regulation strategies used among individuals with different levels of negative automatic thoughts. Findings from this study will provide an understanding the interplay between negative automatic thoughts and emotional regulation can guide the development of strategies aimed at enhancing adaptive coping mechanisms and fostering a supportive environment within boarding school communities. The results and conclusion of the study will be discussed in the full-paper.

Keywords: Negative automatic thoughts, Emotional regulation, Government Boarding Schools, Adolescence, Boys, Students

2.1: CBT for Child & Adolescent issues

207/T2.1/OP/102: Effectiveness of Solution-Focused Brief Therapy on Behavioral and Emotional Problems, Self-Efficacy and Well-Being among Children of Alcoholics

Authors: Kudrat Sachdeva, Priyanka Samuel

Contact: sachdevakudrat2908@gmail.com

Country: India

Abstract: Background and Aim: Children of alcoholics are at risk of developing various physical, emotional, psychological, social deficits and are susceptible of developing psychopathology in their adulthood as concluded by the research in the area. Psychotherapy approaches to this population can help reduce the burden of mental health in the country along with improving their wellbeing. The aim of the present study was to assess the effectiveness of Solution Focused Brief Therapy on behavioral and emotional problems, self-efficacy, and well-being among children of alcoholics as compared to those receiving supportive therapy.

Method: Participants (N=30) in the age range of 12-17 years were grouped under intervention and comparison group equally. 5 sessions of solution-focused therapy were provided to the children in the intervention group and 2 sessions of supportive therapy were given to the children in the comparison group. Primary outcome variables were behavioural and emotional problems; self-efficacy and well-being.

Results: Statistically significant improvements with high effect sizes were reported for participants receiving SFBT on all the measures, from baseline to post-intervention and in comparison, to those receiving supportive therapy. Participants receiving supportive therapy also reported improvements along the measures of self-efficacy and well-being.

Conclusion: The study revealed the presence of behavioral and emotional problems in children of alcoholics along with low self-efficacy and well-being. Solution focused approach was found to be highly effective for children of alcoholics by improving their self-efficacy and well-being and reducing behavioral and emotional problems. The comparison group also generated significant results on two of the variables but SFBT was more statistically superior to supportive therapy.

Keywords: solution focused brief therapy, supportive therapy, behavioral and emotional problems, self-efficacy, well-being, children of alcoholics

2.3: Advances in treatment of mood disorders and suicidal behavior

216/T2.3/OP/106: CBT in Obsessive-Compulsive Disorder Comorbid with Depression

Authors: Nudrat Jahan, Nimisha Kumar, Shadma Jahan, Deoshree Akhouri, Mohammad Amir Usmani

Contact: nudrat.net@gmail.com

Country: India

Abstract: Obsessive-Compulsive Disorder (OCD) is a mental disorder characterized by Repeated and persistent thoughts, urges, or images that are experienced, at some time during the disturbance, as intrusive and unwanted, and cause marked anxiety or distress in individual. Many patients diagnosed with OCD, after long period of time complains about developing depression. Life time prevalence of Depression comorbidity with OCD is 40 to 80%. Objective of this study was to study the effectiveness of SSRIs, CBT and Family counselling in treatment of Depression comorbid with Obsessive Compulsive Disorder. Method: Quasi Experimental Research Design was used for this study. Sample was selected by using purposive sampling method. Inclusion criteria for sample selection was patient diagnosed with comorbidity of depression in OCD, and exclusion criteria was patients suffering from any other physiological or mental health issues. A total number of 6774 patients of different mental disorder were screened from Psychiatric OPD of Jawaharlal Nehru Medical College Hospital, Aligarh, India. Among them 30 patients were selected according to the research criteria. Measures: Y-BOCS and BDI-II Scales. Procedure: Three Treatment combinations were prepared- only Selective Serotonin Reuptake Inhibitors (SSRIs); SSRIs and CBT; and SSRIs, CBT and Family Counselling. Treatment was given in Out-Patient Setting. Total duration of intervention was of three months. 11 patients treated with SSRIs only, 10 patients were treated with SSRIs and CBT combination, and 9 patients were treated with SSRIs, CBT along with Family counselling. Pre and post treatment data recorded on Y-BOCS and BDI-II. Result: Pre-post treatment scores of all three groups were analysed by using non-parametric tests. Patients in all three groups reported with decrease in symptom severity after taking treatment. Significant difference found in post treatment scores of all three groups.

Keywords: CBT, SSRIs, Family Counselling, OCD, Depression

2.2: New trends in CBT for Anxiety disorders

224/T2.2/OP/108: Integrating CBT Skills For Alleviating Depressive Traits in College Students: A Preliminary Analysis Using The Big Five Personality Traits

Authors: Vasundhra Verma, Dr. Poonam Phogat

Contact: vasundhramwork@gmail.com

Country: India

Abstract: The present cross-sectional study investigated the interplay between Big Five personality traits, depression, anxiety and feelings of entrapment to help ease out negative feelings faced by college students due to high pressure, using the Cognitive Behavioral Therapy (CBT) skills. For the purpose of data collection, we gathered data from 367 college students, predominantly female students, who participated in this study, completing offline surveys on personality assessments and related scales on capturing depressive symptoms. For performing the statistical analyses, we used IBM SPSS (v.29) to assess inter-correlations between the variables and simultaneously ran multiple regression analysis to assess different dimensions of personality to assess levels of depression, anxiety and stress. After establishing associations, another regression model was run to assess personality dimensions for testing feelings of entrapment. The findings highlighted significant relationships between extraversion and neuroticism traits with heightened levels of depression, anxiety, and stress among college students. Moreover, the study suggests that by integrating CBT skills, such as cognitive restructuring and behavioral activation, we can probe students to incorporate these skills in daily life. Our study focused on the potential of CBT skills for tailoring specific interventions for young adults based on their distinct personality profiles. Strategies for incorporating CBT techniques into existing mental health support, offer promising avenues to improve the overall mental well-being in this population, corroborating the need to study such concepts in a community-based sample.

Keywords: CBT skills, College Students, Personality Traits, Depression

3.7 Role of CBT in stress management, lifestyle medicine & promoting wellness

227/T2.7/OP/110: Navigating Risky Waters: Unraveling the Impact of Brief Cognitive Behaviour Therapy on High-Risk Sexual Behavior among Recreational Substance Users

Author: Stella Yangzee Sherpa

Contact: starphoenix.stella@gmail.com

Country: India

Abstract: Assam, with its mosaic of ethnicities and traditions, stands as a microcosm of the larger public health issues emerging from the confluence of recreational substance use and high-risk sexual behavior. This research paper investigates the efficacy of two distinct interventions in addressing high-risk sexual behavior among individuals engaged in recreational substance use.

Aim: To study the impact of brief cognitive behaviour therapy and sexual health awareness program on high-risk sexual behavior among recreational substance users.

Methodology: The study employs an experimental design with two experimental groups, each comprising 30 participants aged 18-35, and a control group for comparison. The first experimental group undergoes Brief Cognitive Behavioral Therapy (CBT) over 4-6 sessions, targeting high-risk sexual behavior. The second experimental group participates in an awareness program focusing on high-risk sexual behavior and the prevention of sexually transmitted infections/sexually transmitted diseases (STI/STD). The control group remains unexposed to either intervention. Pre-test and post-test scales, specifically tailored to measure high-risk sexual behavior, will be administered to all groups. These scales serve as a quantitative measure to assess changes in behavior and gauge the effectiveness of the interventions.

Result: Statistical analysis called ANOVA will be employed to compare pre-test and post-test data across the experimental and control groups, enabling the identification of significant differences in high-risk sexual behavior outcomes.

Conclusion: The study aims to contribute valuable insights into the comparative effectiveness of Brief CBT and sexual health awareness programs in reducing high-risk sexual behavior among recreational substance users, with implications for targeted prevention strategies and public health interventions.

Keywords: experimental group, high-risk sexual behaviour, recreational substance use, STD, STI, Brief Cognitive Behaviour Therapy

2.2: New trends in CBT for Anxiety disorders

243/T2.2/OP/115: Effectiveness of Group Cognitive Behavioral Intervention for Test Anxiety among Undergraduate Students of Maharajgunj Medical Campus: Single Group Pretest-Posttest Study

Authors: Sulav Raj Upreti, Suraj Shakya, Khem Bhatta

Contact: sulavupreti@gmail.com

Country: Nepal

Abstract: Background: Test anxiety is referred to as the set of psychological and behavioral responses that accompany concern about likely negative consequences or failure of an exam or similar evaluation situations. A high prevalence of anxiety among medical students has been reported worldwide. Cognitive behavioral interventions are effective ways to deal with test anxiety.

Objective: This study aims to assess the effectiveness of group cognitive behavioral interventions on reducing test anxiety among undergraduate medical students of Maharajgunj Medical Campus.

Materials and Methods: This is a single group Pretest-Posttest study conducted among undergraduate medical students in Maharajgunj Medical Campus at Tribhuvan University. An 8 session group cognitive behaviour intervention adapted from Flaxman, Bond & Keogh (2004) was used as intervention protocol. 40 participants (male=30, female=10) were purposively selected after screening 130 participants. Only 26 participants (male=20, female=6) completed the study, while 35% participants dropped out due to academic and clinical responsibilities or other unknown reasons. General Health Questionnaire (GHQ; Goldberg, 1979) and Westside Test Anxiety Scale (WTAS; Driscoll, 2004) were used to screen the participants. However,

Westside Test Anxiety Scale was also used primary outcome measure during the baseline and after intervention.

Results: There is significant reduction in test anxiety among the participants with large effect size ($d=1.93$). Similarly, participant has significant reduction in impairment and worry components of test anxiety. In addition to this, subjective feedback of the participants also show that intervention was useful.

Conclusion: This study showed that group cognitive behavioral intervention is effective in reducing test anxiety. A larger study trial can further explore the effectiveness of group cognitive behavioral intervention among medical students. Overall, such intervention can be useful for medical colleges to improve the academic and quality of life of medical students.

Keywords: Cognitive Behavioral Intervention, Effectiveness, Medical Students, Test Anxiety

2.2: New trends in CBT for Anxiety disorders

250/T2.2/OP/119: Effectiveness of Mindfulness-based Exposure and Response Prevention Therapy in Patients with Obsessive Compulsive Disorder

Authors: Asem Babina Devi, Prof. RK Lenin Singh

Contact: asembabina@manipuruniv.ac.in

Country: India

Abstract: Obsessive Compulsive Disorder (OCD) is considered to be one of the most debilitating and disturbing mental health condition which causes significant distress to the person that has been diagnosed. It is characterized by unwanted, intrusive, irrational thoughts, images and impulses which causes significant negative emotions such as anxiety and fear which provokes the person to engage in compulsive behavior which provides temporary relief to the person. The problematic thoughts cause the compulsive acts as a way to neutralize the distressing emotions that accompanied the thoughts. OCD is also ranked as one of the top ten causes of disability worldwide in 2000 by the American Psychological Association (APA). The World Health Organization has ranked OCD as one of the most handicapped psychological conditions which can cause loss of income and decreased quality of life. So, in order to deal with the condition, the best form of intervention is pharmacotherapy and psychotherapy. In the psychological intervention, Exposure and Response Prevention therapy (ERP) is the gold standard treatment for OCD. However, some of the challenges that can occur with ERP is high dropout rates and difficulty engaging in between sessions. The mindfulness interventions, which is one of the third wave behavioral therapy could be incorporated into ERP in order to enhance the intervention and bring down the limitations that comes with the treatment. The present study is intervention research with an intent-to treat patients who has been diagnosed with OCD. 40 patients who has been diagnosed using the ICD 10 criteria has been recruited. 20 patients are assigned to ERP and Mindfulness based ERP group. Pre-assessment are done using the Y-BOCS II and Mindfulness Attention Awareness Scale (MAAS). They were given 8 to 10 sessions of ERP and Mindfulness based ERP. After the session has been completed, post assessment using the same scale is done. Then the pre and post assessment are compared. The results of the study will be discussed elaborately later.

Keywords: Obsessive Compulsive Disorder, Exposure and Response Prevention Therapy, Mindfulness-based Exposure and Response Prevention Therapy

2.1: CBT for Child & Adolescent issues

251/T2.1/OP/120: Efficacy of Dialectical Behavior Therapy Skills in Children and Adolescents with Dissociative Disorder: A Pre-Post Intervention Study in India

Authors: Sneha Das, Neha Sayeed, Nishant Goyal

Contact: snehadas216@gmail.com

Country: India

Abstract: Background: Dissociative disorders are a group of psychiatric conditions characterized by disruptions in consciousness, memory, identity, and perception. They often emerge during adolescence, a crucial developmental stage where individuals are particularly susceptible to psychopathology. While various treatment approaches exist, including psychotherapy and pharmacotherapy, there is a limited empirical understanding of their effectiveness, especially in adolescents diagnosed with dissociative disorders. Given the scarcity of evidence and the pressing need for effective interventions in this population, we authors found it crucial to explore the efficacy of DBT-A for adolescents with dissociative disorders.

Objective: This hospital-based pre-post intervention study aimed to investigate the efficacy of adjunctive Dialectical Behavior Therapy (DBT-A) compared to Treatment as Usual (TAU) in improving dissociative symptoms, depressive symptoms, anxiety, coping, impulsivity, and emotion dysregulations in adolescents with dissociative disorder.

Methods: Study was conducted at Central institute of Psychiatry, India, following purposive sampling method. Following sample size estimation, a total of 50 adolescents aged 12 to 17 years were enrolled in the study. To ensure eligibility, participants underwent assessments using the Mini-International Neuropsychiatric Interview for Children and Adolescents (MINI kid) and the Standard Progressive Matrices (SPM), excluding those with intellectual disability and comorbid psychiatric illnesses except depression. Sequential and random allocation was employed to assign participants to either the therapy group or the Treatment as Usual (TAU) group. Outcome measures included the Multidimensional Inventory of Dissociation (MID), Barratt Impulsiveness Scale Version 11 (BIS-11), Hamilton Anxiety Rating Scale (HARS), Childhood Depression Inventory-II (CDI-II), Cognitive Emotion Regulation Questionnaire (CERQ), and Adolescent-Coping Orientation for Problem Experiences (A-COPE). Pre/baseline, post-intervention, and 2-month follow-up measurements were collected for both groups, and data were analysed using descriptive statistics and repeated measure ANOVA.

Results: The study and TAU groups exhibited comparable sociodemographic, clinical parameters and baseline symptom scores. Findings suggested significant improvements ($p < 0.05$) in dissociative symptoms, as well as depressive symptoms, anxiety, impulsivity, coping, and emotion regulation, were observed across the three time points, indicating therapeutic efficacy with small to medium effect size.

Discussion: The findings demonstrated significant improvements in dissociative symptoms and related psychopathology after 8 weeks of DBT-A and treatment improvement were maintained till 4 months study period. Additionally, the therapy group exhibited greater improvements

compared to the TAU group, highlight the efficacy of the DBT-A module as an effective therapeutic intervention for adolescents with dissociative disorders in India.

Conclusion: The incorporation of DBT skills in the treatment of dissociative disorders in Indian adolescents demonstrates promising therapeutic efficacy. Further research with larger sample sizes and generalize these novel findings and contribute to the development of evidence-based interventions in adolescent mental health.

Keywords: Dissociative Disorder, Psychopathology, Dialectical behavior Therapy, Adolescents, Intervention study

2.2: New trends in CBT for Anxiety disorders

256/T2.2/OP/121: CBT for Health Anxiety among College students

Authors: Dr. Mavis Henriques, Marika Francisca De Lima

Contact: mavis_henriques@hotmail.com

Country: India

Abstract: Post Covid-19 evidence indicates an increase in health anxiety among individuals and this has been documented globally. College students are a distinctive subset of a population who have shown consistent levels of elevated psychological distress associated with the current challenges post-COVID-19. The current research aims to study the effects of CBT on the health anxiety of college students of a college in Goa. The sample includes 400 students from different college streams, diverse religious backgrounds and different age groups. Data was recorded as observations of 400 students using CBT techniques for health anxiety. The results indicate an increase in wellbeing after using CBT for health anxiety, with reduced levels in nearly half the students experiencing health anxiety.

Keywords: Health Anxiety, CBT, College Students

2.2: New trends in CBT for Anxiety disorders

268/T2.2/OP/123: The efficacy of emotional freedom technique and cognitive behavioural therapy in reducing anxiety in young adults: A comparative study

Authors: Afreen Qureshi, Rati Khurana

Contact: afreen.q0220@gmail.com

Country: India

Abstract: Objective: The objective of the study was to compare the efficacy of emotional freedom technique and cognitive behavioural therapy in reducing young adult anxiety.

Design: Convenience sampling was used in the study.

Participants: A total 40 participants were included in the study who scored moderate to severe in GAD-7 scale. Participants were young adults between 18- 24 years old. Divided into two groups of 20 each, EFT (n=20) and CBT (n=20) in the intervention groups.

Intervention: Adolescent anxiety can be addressed most effectively with cognitive behavioural therapy (CBT). EFT is comparatively a new therapy that includes acupuncture or

meridian points for stimulation and resolving distress. Young adults assigned to the CBT and EFT treatment groups received two individual sessions from trained practitioners.

Outcome measure: GAD-7 was used in to assess pre and post-intervention anxiety levels in participants.

Results: Post a preliminary trial it was observed that EFT helped reduce symptoms of anxiety. But CBT is the widely accepted and evidence-based therapy for anxiety the results would compare both.

Conclusion: EFT is a faster and more efficacious technique to reduce anxiety in young adults compared to CBT.

Keywords: Adolescent Anxiety, Emotional Freedom Technique, EFT, CBT

2.5 Subs abuse & addictive behaviours

270/T2.5/OP/123: Contemporary Significance of CBT for Behavioural Addiction: A Systematic Literature Review

Authors: Akshita Agarwal, Dr. Anita Manglani, Indu Bela

Contact: anita_fbs@sgtuniversity.org

Country: India

Abstract: Abstracts stimulate the dopamine center in the brain, potentially leading to addictive behavior (Pugle, 2022). It is an umbrella term for behaviors such as binge eating, exercise, gambling, internet use, plastic surgery, porn, sex, shopping, social media, and video games constitute. According to Griffiths (2005), a behavioral addiction involves six core components: salience, mood modification, tolerance, withdrawal symptoms, conflict, and relapse. Cognitive Behavioral Therapy (CBT) is adaptive tool that has been extensively utilized in treating addiction

including behavioural addiction. It targets individuals' cognitions, such as thoughts, beliefs, and metacognitions, employing diverse strategies to effectively regulate emotions and behavior (Lee, Ross, Cash, 2021).

Objective: This study substantiated the significance of CBT for behavioural addiction, through systematic review approach.

Methods: The objective was achieved by meticulously organizing the results related to efficacy of CBT on behavioural addiction, based on a wide range of research in the past three years. The systematic review study followed the protocol outlined by PRISMA. A literature search was carried out on only Google Scholar databases published from 2021 onwards. The key terms used were "Behavioural Addiction", "Addiction", "CBT", and "Cognitive Behavioural Therapy". The search strategy was executed under three phases: search, screening, and selection.

Results: A systematic analysis extracted the key findings. The finding revealed the effectiveness of CBT for wide range of behavioural addiction including game addiction (Tambunan, Kumboyono, & Lestari, 2023; Narullita, Dewi and Yuniati, Erni, 2021), Smartphone Addiction (Govarthini,2023; Bong, Won, & Choi, 2021), Technology Addiction (Lopez-Fernandez, et al., 2022), Kleptomania (Asami, et al.,2022), Gambling disorder (Emura, et al.,2024; Pfund, et al., 2023), Pornography (Lotfi, Babakhanin, & Ghazanfarpour, 2021), & Exercise addiction (Knapp, Miller, Outar, & Turner, 2023).

Conclusion: The present review provides a sketch of the contemporary significance of CBT for wide range of behavioural addictions

Keywords: Behavioural Addiction, Game Addiction, Smartphone Addiction, Technology Addiction, Gambling Disorder, Pornography, & Exercise Addiction and Cognitive Behavioural Therapy

2.6: Trends in Early Intervention of Psychosis & Personality Disorders

271/T2.6/OP/124: The Effectiveness of Individualized Schema Therapy in Adults with Borderline Personality Disorder

Authors: Dr. Hamza, Dr Deoshree Akhouri

Contact: hamza_fbasc@sgtuniversity.org

Country: India

Abstract: Background: Psychotherapy has long been thought to be one of the most challenging methods of treating borderline personality disorder (BPD). Young et al., 2003 describe schema therapy which has been developing as a treatment that offered as a novel and promising therapy method for folks who have years of experiencing this disorder.

Aim: To investigate whether 12-session intervention consisting of Schema Therapy was more efficacious than routine treatment (pharmacological alone) in managing BPD and improving other symptomatology.

Method: A sample of 23 patients with BPD as per the inclusion and exclusion criteria were included in the present study from the OPD and IPDs of the Psychiatry department of Jawaharlal Nehru Medical College & Hospital, Aligarh. Participants were randomly allocated to Schema Therapy or treatment as usual (TAU) and were assessed on multiple outcomes at baseline, at 12th week, and 3 months follow-up.

Results & Conclusion: There were significant improvements over time in the sample. The Schema Therapy intervention was found efficacious in treating BPD with good effect size.

Keywords: Schema Therapy, Psychotherapy, Borderline Personality Disorder, effect size

2.5 Subs abuse & addictive behaviours

273/T2.5/OP/125: Cognitive Behavior Therapy VS Motivation Enhancement Therapy in Prevention of Relapse among Alcohol Use Disorder Patient: Hospital-Based Intervention Study

Authors: Dr. Deoshree Akhouri, Tabassum Bashir, Dr. Hamza

Contact: gi3057@myamu.ac.in

Country: India

Abstract: Background: The clinical manifestation of the symptoms of alcohol use disorder (AUD) is heterogeneous and leads to adverse impacts on physical and psychosocial health. Several studies described both cognitive impairments and psychiatric disorders among people with Alcohol use disorder. However, AUD can be present without comorbid psychiatric disorders or severe cognitive deficits, namely, “pure alcohol use.

Aims and objectives: The present study aimed to assess the level of severity and efficacy of two psychological methods of intervention cognitive behavior therapy and motivation enhancement therapy in preventing the relapse rate among alcohol use patients.

Materials and Methods: An intervention-based randomized control trial design, consisting of 34 patients in the Cognitive behavior therapy (CBT) group, and 35 in the motivational enhancement therapy (MET), sample were recruited through purposive sampling methods based on inclusion and exclusion criteria OPD and IPD basis at J. N. Medical College and hospital, AMU, Aligarh. Patients were provided with 10-12 CBT and MET interventions from February 2023 to November 2023. Appropriate scales were applied to collect the data at pre- and post-intervention along with sociodemographic and clinical data sheets.

Results: Significant findings were achieved on the application of statistical analysis at pre- and post-assessment which reflects good effect size after the intervention of CBT and MET. Statistically significant reductions were found in alcohol severity and both therapeutic interventions are nearly equally effective in preventing relapse. **Conclusion:** The findings suggest that CBT and MET interventions are effective in the management of alcohol-related symptoms. The study concluded that alcohol use disorder negatively affects the coping mechanism, self-efficacy, locus of control, mechanism of change, and quality of life. So, there is a need for the various authorities apart from mental health professionals to intervene to reduce the health burden associated with heavy drinking.

Keywords: Cognitive Behavior Therapy, Motivation Enhancement Therapy, Alcohol Use Disorder

2.9: CBT for Cancer, pain management, and Palliative care

282/T2.9/OP/130: Medical and Brief Cognitive Behaviour Therapy for Indian adult patients with cancer: A Randomized Control Study

Authors: Barre V Prasad, Padmaja G, Ravi Kumar Saxena, Suvashisa Rana, Sujata Satapathy

Contact: drvijaycpro@gmail.com

Country: India

Abstract: Background: Cancer care today often provides state-of-the-science biomedical treatment, but hardly addresses the psychological and social (psychosocial) problems associated with the illness.

Methods: The present study employed a one-group pretest-posttest design. The treatment as usual (TAU) group is called group one, and consists of 105 cancer patients (50 male, 55 females) under three cancer types – head and neck cancer (HNC), breast cancer (BC), and lung cancers (LC) (35 in each type) were included. In group two, treatment-as-usual and Brief Cognitive Behaviour Therapy (TAU and BCBT) 30 cancer patients (19 men, 11 women) under three cancer types – HNC, BC, and LC (10 in each type) were included. When both TAU and BCBT are used together then it's called combined intervention (CI) by using a convenience sampling method. The research instruments were used for the study. The Questionnaire on Stress in Cancer Patients- Revised Version, Brief Cope questionnaire, and EORTC QLQ-C30. For the final analysis, 30 patients were randomly selected from the first group of 105 participants and 30 from group two, a total (n=60) were analyzed for the study.

Results: The study findings revealed that treatment as usual and brief cognitive behavior therapy (CI) contributed to the improvement in the variables measured than compared to only TAU. This was seen in the reduced stress, improved coping strategies, and quality of life.

Conclusion: The present study indicated that brief cognitive behaviour therapy when combined with TAU showed better results. This signifies the effectiveness of combined intervention for patients with cancer when compared to the administration of only TAU.

Keywords: brief cognitive behaviour therapy, cancer, coping strategies, Stress, quality of life, treatment as usual

2.1: CBT for Child & Adolescent issues

283/T2.1/OP/131: Mapping Emotional Health in School Students: From Challenges to Solutions

Authors: Ruchi Parihar, Tanvi Kothiwale

Contact: ruchi.parihar@prasadpsycho.com

Country: India

Abstract: Children and adolescents encounter diverse life challenges, particularly during their early milestones. This paper aims to focus on emotional health, exploring the challenges and examining which aspects of students' emotional health are significantly correlated and impactful.

The present study looked to explore the emotional health and the challenges faced by school students. A recently developed instrument created by Prasad Psycho Pvt. Ltd. (Student's Emotional Health Assessment Tool- SEHAT, 2023) was administered to a sample of 121 students ranging from 10-18 years. Purposive sampling was used to collect the data. An exploratory design was used and data were analysed with the help of descriptive and inferential statistics for different class clusters (5th-7th, 8th-9th and 10th-12th). Results indicated a statistically significant difference between the three clusters, where cluster 3 (10th-12th grade) had the most affected emotional well-being than the other two clusters. Results also showed a significant correlation among academic stress, bullying, interpersonal trauma, suicide/self-harm, and protective factors (e.g., family adjustment, peer support, emotional intelligence, and self-efficacy) across all three clusters. In the sample of 121, around 45.64% & 41.09% of students had deteriorated emotional health in the protective factors & internalising habits domain.

In the transition from childhood to adulthood, experiences instil core beliefs in individuals. The study aims to delve deeper into the interconnectedness between core beliefs and emotional health. Additionally, future implications for development involve addressing unhealthy patterns of thoughts and emotions at an early stage to prevent long-term consequences to mental health. Thus, the study suggests that incorporating CBT into school programs, both curricular and extracurricular, emerges as a potential avenue for fostering sustained emotional well-being among students.

Keywords: Emotional Health, Mental Health, Students, CBT, Intervention

1.7: Transdiagnostic CBT for PTSD in adolescents and adults

310/T1.7/OP/134: Cognitive Behavioural Therapy (CBT) on Post-Traumatic Stress Disorder Incurred by Childhood Trauma in Young Adulthood- A Case Study Analysis

Authors: Zahbiya Joozer Ceyloni

Contact: zahbiya.mwb@gmail.com

Country: India

Abstract: Aim: To analyse the case of a 20-year-old female client suffering from Major Depressive Disorder (MDD) and Post Traumatic Stress Disorder (PTSD) with a treatment plan using Cognitive Behavioural Therapy (CBT).

Methodology: Case history presentation.

Summary: As defined by the Diagnostic and Statistical Manual of Mental Disorders- 5 (DSM-5), Post Traumatic Stress Disorder (PTSD) is the development of symptoms after exposure to one or more traumatic events causing immense distress affecting daily life and functioning. A case of a 20-year-old female student listed under King Edward Memorial Hospital Pune was recorded. Diagnosed with Major Depressive Disorder and Post Traumatic Stress Disorder, her treatment plan using CBT was analysed and recorded. The gradual progress and impact of the treatment plan were analysed using a systematic review analysis to discern the prognosis.

Conclusion: CBT is a dependable treatment technique for PTSD. An eclectic approach with CBT can yield much better results.

Keywords: cognitive behavioural therapy, post-traumatic stress disorder, childhood trauma, review analysis, case history

2.7: CBT for chronic and specific medical conditions

311/T2.7/OP/135: Effectiveness of Cognitive Behavioural Therapy on Irritable Bowel Syndrome: A Systematic Literature Review

Authors: Varsha, Priyanshu Dagar and Shivani Tokas

Country: India

Abstract: Irritable bowel syndrome (IBS) is a common chronic gastrointestinal syndrome characterized by abdominal pain, bloating, and altered bowel habits. It has created a significant impact on both society and patients' well-being. Recent shreds of evidence have shown that the brain-gut axis plays a key role in the disorder, and the presence of psychological factors and central processing deficits contribute to symptom severity and disability. A systematic review was conducted using existing bodies of literature available on authentic and reliable sources on the internet such as Google Scholar, peer-reviewed articles, research gate, PubMed etc., that investigate the effectiveness of cognitive behavioral therapy (CBT) in patients diagnosed with IBS has proven significant outcomes in reducing the severity of symptoms and levels of psychological distress of IBS that alter the quality of life of an individual. The majority of studies met the inclusion criteria that reveal variations in treatment protocols and delivery methods demonstrating the effectiveness of CBT involving exposure-based treatments and internet-based treatment models to target visceral anxiety contributing to symptoms. Cognitive Behavioral Therapy is demonstrated as an effective intervention for managing symptoms and

improving the overall well-being of individuals with irritable bowel syndrome but the clinical presentation and management of IBS varies depending on geographical regions, socio-cultural, and psycho-social factors, and individual dietary habits. Lastly, this review analyses that despite the clear benefits of CBT for IBS, very few patients have access to this specialized approach.

Keywords: Irritable Bowel Syndrome, Cognitive Behavioral Therapy, Systematic Review, Symptom Management, Psychological Intervention

1.15: Others

312/T1.15/OP/136: Transformation of Self-talk to Improve Well-being of Young Adults: A Pilot Study

Authors: Arya Aravind

Contact: arya.aravind@s.amity.edu

Country: India

Self-talk, also known as inner speech or intrapersonal communication, is a ubiquitous and multifaceted psychological phenomenon that involves the process of individuals engaging in a dialogue with themselves. This internal dialogue is spoken words under one's breath or sometimes even expressed verbally. Self-talk plays a crucial role in shaping emotions, behavior, and decision-making. Well-being can be defined as the combination of various feelings experienced by an individual in their day-to-day life. It is a composite measure that takes into account independent feelings about a variety of life concerns, in addition to overall feelings about life in both positive and negative terms. Several factors contribute to the well-being of young adults, and addressing these aspects is crucial for promoting a positive and fulfilling transition into adulthood. The impact of self-talk on the well-being of young adults is significant, as the internal dialogue individuals have with themselves shape their thoughts, emotions, behaviors, and overall mental health. This research delves into the intricate realm of self-talk and its profound implications on individuals' mental well-being. Also, this research is an attempt to contribute to the development of effective mental health strategies by promoting a healthier and more resilient self-talk to improve well-being of young adults. Pilot study of both quantitative and qualitative nature was carried out on seven young adults. In this study structured process was adopted to change the self-talk. On basis of comparing subjective unit of distress the preliminary findings suggest that transformation of self-talk creates a significant positive impact on the well-being of young adults. Also, nurturing a supportive internal dialogue can contribute to a healthier and more fulfilling life. This study contributes valuable insights in understanding about the role of self-talk in shaping one's well-being.

Key Words: Self-talk, Young adults, Well-being

1.11: Traumatic life events, women, and mental illnesses

313/T1.11/OP/137: Transforming Self-Talk of Women with Premenstrual Syndrome: A Pilot Analysis

Authors: Sayma Ayyub, Dr Prof Manju Agarwal

Contact: sayyub@lko.amity.edu

Country: India

Abstract: Premenstrual Syndrome (PMS) is a common and often challenging experience for many women, characterized by a range of physical, emotional, and psychological symptoms occurring in the initial phase of the menstrual cycle. This study explores transforming the self-talk of women dealing with PMS. The objective is to investigate whether empowering women with effective positive self-talk can lead to improved coping mechanisms, enhanced emotional well-being, and a more positive perception of self during the premenstrual phase.

The intervention involves a structured program adopted to change the self-talk to negative to positive incorporating physiological and psychological aspects of PMS. Participants engage in self-reflection, learn to identify negative self-talk patterns and acquire skills to reframe and replace these thoughts with more constructive and compassionate ones. The study employs a mixed-methods approach, including quantitative measures of symptom severity and emotional well-being, as well as qualitative analysis of participant narratives to capture subjective experiences and perceptions.

Preliminary findings indicated reduction in premenstrual symptoms score from moderate to mild in 7 out of 10 cases. These results were obtained in 2 to 5 sessions on the transformation of self-talk and the sessions were stopped after the subjective unit of distress came to 0 or 1 and the client herself desired to discontinue the session as she felt relieved of symptoms. Participants report increased self-awareness, emotional regulation, and a sense of empowerment in managing the challenges associated with the premenstrual phase. The study contributes to the growing body of research on psychological interventions for women's health and underscores the importance of addressing the cognitive and emotional aspects of PMS alongside traditional medical approaches.

Ultimately, this research has implications for the development of tailored interventions that focus on transforming self-talk as an integral component of holistic care for women experiencing premenstrual symptoms. By focusing on a positive self-dialogue, women may be better equipped to navigate the challenges of PMS, leading to improved overall well-being and a more positive perception of their menstrual cycles.

Keywords: Self-talk, Premenstrual syndrome, Physiological symptoms, Psychological symptoms, and Young women

2.1: CBT for Child & Adolescent Issues

315/T2.1/OP/139: Psychological Interventions for Adolescents and Young Adults with Self Harm: A Systematic Review

Authors: Akanksha Yadav, Sujata Satapathy, Bichitra Nanda Patra, Barre V Prasad

Contact: akankshay41295@gmail.com

Country: India

Abstract: Self-harm is often associated with trauma experiences and has complex psychological underpinnings. It is a major mental health concern especially for adolescents and young adults as self-harm behaviour is often seen to start in the early years and peaks during this period. Self-harm and trauma has shown to increase the risk of suicide and other mental health problems. Over the years tremendous progress has been made in understanding this phenomenon but research on intervention for self-harm and trauma are still at the nascent stage in Asia. A search performed using PubMed, PsycNET, and Scopus with the keywords (intervention[Title] OR treatment[Title] OR therapy[Title]) AND (adolescent[Title/Abstract] OR young adult[Title/Abstract]) AND (trauma[Title] OR self-harm [Title] OR self-injury [Title]). The results yielded 53 potentially relevant studies from 1990 to 2023 out of which 13 Randomised Controlled Trials (RCT) are included in this review. Trauma-focused therapy in group, as well as individual setting and family therapy, have been frequently used. Internet-based interventions have also recently emerged. This review will highlight the current status of intervention research, changing trends, as well as trends in Asia.

Keywords: Self Harm, Self-Injury, Trauma, Adolescents, Young Adults, Asia

2.1: CBT for Child & Adolescent Issues

316/T/2.1/OP/140: Investigating challenges and strategies in the context of cognitive behavioural therapy practice with children and adolescents-A Qualitative Study

Authors: Karishma Malhotra, Dr. Chinu Agrawal, Swati Juneja

Contact: jalankarishma@hotmail.com

Country: India

Cognitive Behavioural Therapy is a popular choice of treatment for psychologists in India, however, there are unique nuances, triumphs and challenges encountered by psychologists utilizing Cognitive behavioural therapy with children and adolescents. Practitioners have tried to cope with this efficiently in their own way by employing various creative strategies to suit the cognitive development of children and adolescent clients. This study aims to bring to light these unique challenges and the CBT interventions used by practitioners in the context of children and adolescent clients. The practitioners using CBT for children and adolescents in their practice for at least 5 years were included in the study. A semi-structured in-depth interview was conducted amongst practitioners selected through professional organization contacts. Data analysis involved thematic coding to uncover patterns, commonalities and variations in the experiences shared by the participants. Preliminary findings highlight the nuanced nature of applying CBT techniques in the context of children and adolescents shedding light on the successful therapeutic interventions, offering a roadmap for refining and adapting CBT practices. This study holds implications for shaping tailored CBT interventions for children and adolescents.

Keywords: Cognitive behavioural therapy, adolescents, children

POSTERS

2.10: Transdiagnostic CBT for co-morbid illnesses

8/T2.10/P/3: Implications and Challenges of Cognitive Behavior Therapy for Obsessive-Compulsive Disorder with Co-morbid Personality Disorders

Authors: Arpita Roy Choudhury, Susmita Halder

Contact: archoudhury95@outlook.com

Country: India

Abstract: Aim And Methodology: Cognitive behavior therapy (CBT) is a family of interventions with a trans-diagnostic and personalised approach. It has extensive empirical support and is found to be highly efficacious for anxiety disorders, somatoform disorders, mood disorders, etc. But there have been contrasting results regarding the influence of co-morbid personality disorder (PD) on CBT outcomes for anxiety disorders. The risk of having at least one comorbid PD such as obsessive-compulsive personality disorder (OCPD), schizotypal PD, dependent PD, etc. is the highest for obsessive-compulsive disorder (OCD) among all anxiety disorders that affect treatment outcomes. Thus, the present study examined the implications and challenges of CBT for patients with OCD and comorbid PD. Three individuals (two males of 19 and 21 years and one female of 35 years) completed a regimen of CBT (10-17 sessions). They had obsessive thoughts such as obsession with the need for symmetry or exactness, fear of being responsible for something terrible happening, and religious obsessions, along with compulsive behaviors such as the need to repeat routine activities, excessive praying, and hand washing, respectively. They also presented with comorbid OCPD, anxious avoidant PD, and dependent PD, respectively, as assessed by the ICD-10 International Personality Disorder Examination (IPDE). The Yale-Brown Obsessive-Compulsive Scale (Y-BOCS) was administered to assess the severity of OCD.

Summary of Results: After the sessions, quantitative and qualitative analysis showed that there was a reduction in compulsive behavior and obsessive thoughts for all the patients. However, the patient with co-morbid OCPD had a fluctuating course of treatment outcome, and his poorer motivation and preoccupation with details interfered with the course of therapy.

Conclusions: Thus, the present case series showed the implications and challenges of CBT for OCD with co-morbid PD. It is important that the treatment plans of such patients be individualised to address the issues posed by comorbidity.

Keywords: Obsessive-Compulsive disorder, Personality disorders, Cognitive behaviour therapy, implications, challenges

2.6: Trends in Early Intervention of Psychosis & Personality Disorders

9/T2.6/P/4: Finding Efficacy of Cognitive Behavioural Approach in Emerging Personality Disorder by a Case Series

Authors: Surabhi Ghosh & Susmita Halder

Contact: surabhighosh2010@outlook.com

Country: India

Abstract: Adolescent period is vulnerable and sensitive phase of personality development and also are more prone to difficulties. Along with other problems, teens with disturbed personality

conditions are increasing in wide range now a days. This condition diagnosed as emerging personality disorder as personality Disorder can't be diagnosed before the age of eighteen years. The early signs of pathological behaviour that evolves before this age predict persisting deficits in daily life functioning, relationship difficulties and can increase instability in academic and occupational life. The early experiences can affect an individual's view towards the world and others around them, how others will react to their expectations and treat them. This sequentially affects to interact with others, reaction towards them and their ways of coping. A greater chance is present those behaviour can continue and cause high risk to generate Personality Disorder later on in their adulthood. The present study attempts to explore the efficacy of Cognitive Behavioral approach by a case series of 3 adolescents diagnosed with Emerging Personality Disorder. Two females and one male adolescent within the age range of 12-17 were taken up in the present study, presented with complaints of low mood, irritability, changes in sleep pattern, anger outburst, emotional instability, impulsive decision making, instability in relationships and difficulty in trusting others. CBT techniques were applied on these cases along with other techniques and bringing significant improvement after 14- 15 sessions. It has been found that there is beneficial effect of CBT across several domains like in irritability, impulsive behaviour, anger outbursts and emotional regulation. Studies support that fact that CBT techniques found effective if used with right blending of other techniques.

Keywords: Emerging Personality Disorder, Cognitive Behavioural Therapy (CBT), Adolescents, Emotional Regulation.

2.11: CBT for obesity, psycho-somatic and body image issues

22/T2.11/P/8: Neurodevelopmental and personality traits of somatic symptom disorder

Authors: Mirai Miyoshi, Rieko Takanashi, Kayoko Taguchi, Tokiko Yoshida, Eiji Shimizu

Contact: mirai.3.2008.ptn@gmail.com

Country: Japan

Abstract: Aim and Methodology: There are only a few research investigating the relationship between Somatic Symptom Disorder (SSD) and neurodevelopmental and personality traits. We aimed to examine the relations between somatic symptom disorder (SSD) and neurodevelopmental and personality traits to develop cognitive behavioral therapy for SSD. In this case-control web survey study, we used the Somatic Symptom Disorder-B Criteria Scale (SSD-12), the Patient Health Questionnaire-15 (PHQ-15), the Patient Health Questionnaire-9 (PHQ-9), Generalized Anxiety Disorder-7 (GAD-7), the short Health Anxiety Inventory (SHAI), Adult ADHD Self-Report Scale-V1.1(ASRS-V1.1), the Autism Spectrum Quotient (AQ), the Personality Inventory for DSM-5-Brief Form (PID-5-BF)-Adult, Ten Item Personality Inventory (TIPI). We performed a cross-sectional study using data from web survey system during 31st August to 20th September 2022. Ethics approval was granted from The Institutional Review Board of Graduate School of Medicine and School of Medicine, Chiba University (approval number: M10399).

Summary of Results: 4.6% of the participants were screened as positive for SSD-12. We identified 511 SSD group (mean age 49.2±12.9) and 534 age, sex-matched healthy control group. SSD group had significantly higher scores of depression, anxiety, health anxiety, inattention, hyperactivity, negative affectivity, antagonism, psychoticism, neuroticism, less

social skill, less attention switching, less communication, and less extraversion compared with healthy control group.

Conclusions: These findings suggest that SSD may have depression, anxiety, neurodevelopmental and personality traits. Therefore, it may be important that we consider not only somatic and affective symptoms but also neurodevelopmental and personality traits when we intervene with CBT for SSD. Due to the cross-sectional design of this study, no causal conclusions can be drawn. Further research is needed to draw more reliable conclusion.

Keywords: Somatic Symptom Disorder, neurodevelopmental traits, personality traits, cognitive behavioral therapy

2.15: Others

23/T2.15/P/9: A Case Report: Measuring Physiological Indices During Applied Tension and Sharing Them with the Patient Contributed to the Efficacy of the Treatment for Blood-Injection-Injury Phobia

Author: Keitaro Murayama

Contact: murayama.keitaro.003@m.kyushu-u.ac.jp

Country: Japan

Abstracts: Aim and Methods: The aim of this case report is to show that the progress of treatment for blood-injection-injury phobia was aided by measuring physiological indices during Applied Tension (ApT) and sharing them with the patient.

Summary of results: The patient had avoided being seen in a healthcare setting for a prolonged period because of fear of nausea and fainting when her blood was drawn. In the treatment sessions, the therapist measured the patient's pulse rate and blood pressure at baseline and during the ApT and communicated the results with the patient at each ApT session. After twelve sessions, the patient did not feel nausea or fear when her blood was drawn. There was no recurrence of the symptoms at the follow-up session ten weeks after the last treatment session. Conclusion: In ApT, it was inferred that sharing the pulse rate and blood pressure values with the patient aided the patient's understanding of the symptoms' mechanism and the treatment's progress.

Keywords: blood-injection-injury phobia, Applied Tension, vasovagal reflex, monitoring pulse rate and blood pressure

2.15: Others

24/T2.15/P/10: Effects of Cognitive Behavioral Program of the Stress and Depression

Author: Juli-ann Balmonte

Contact: mimsmarn@gmail.com

Country: Philippines

Abstract: Stress and depression among adolescent and often goes untreated with adverse effects on academic success and healthy development. The early screening can facilitate early identification and timely referral to prevent further harm to one self. Nursing education /

training can be a stressful and depressive experienced which may result with different behavioral such as drop out in the school, drug addiction, suicidal and other forms of pessimistic performance. This study will conduct to prove the effectiveness of cognitive – behavioral therapy on the stress and depression among nursing student to enhance their self-image and coping mechanism. The participants in this study were the senior nursing students who are chosen because of their pretest scores were at the above average level of stress and depression in the Stress Profile (SP) and Beck Depression Inventory (BDI). They will be randomly assigned to the experimental and control group. The experimental group will undergo cognitive – behavioral therapy while the control group is the usual counseling given by the school. The treatment was conducted for a period of six week, with two sessions each week. Each will be given for two hours. Immediately after the twelve session of the intervention, the SI and BDI will be administer again to the participants to determine if the intervention significantly reduced the participants stress and depression level. The result of the study revealed that there were significant difference in the levels of stress and depression in the experimental groups which mean that the participants have greatly decrease their stress and depression compared to the control group. In general, the study confirmed the effectiveness of cognitive–behavioral programs to the participants.

Keywords: Nursing Student, Stress and Depression

2.14: CBT for suicide and Postvention services

34/T2.14/P/15: The relationship between depressive and negative rumination and suicide ideation

Authors: Atsusshi Sakata, Yoshiko Nishimatsu, Ayaka Yanagida, Mao Nanamori, Hiroaki Kumano

Contact: atsusakata@toki.waseda.jp

Country: Japan

Abstract: Aim and Methodology:Rumination influences suicide ideation (Holdaway et al., 2018). Rumination has two concepts: negative rumination which is rumination about negative thoughts, and depressive rumination, which is rumination about depressive thoughts. Negative rumination involves depressive rumination, so negative rumination is a hypernymy of depressive rumination (Hasegawa & Nedate, 2011). However, the relationship between suicidal ideation and these two ruminations is unclear. Therefore, this study aimed to investigate the relationship between suicide ideation and those two ruminations, excluding the influence of depression. This study included the data answered by 103 Japanese university students (34 males, 68 females, and one other) for analysis. The study used the Negative Rumination Scale (Ito & Kamisato, 2001) to measure negative rumination, the Japanese version of the Ruminative Responses Scales of Response Style Questionnaire (Nagura & Hashimoto, 1999) to measure depressive rumination, the Japanese version of the Self-rating Depressive Scale (Hukuda & Kobayashi, 1973) to measure depression and suicide ideation.

Summry of Results: The current study conducted a multiple regression analysis with suicide ideation as the dependent variable and two types of ruminations and depression as independent variables. The results showed that the standard partial regression coefficient was significant for depressive rumination ($p < .05$) and depression($p < .001$).

Conclusions: In conclusion, depressive rumination has a stronger relationship to suicidal ideation than other negative rumination and significantly affects suicidal ideation, excluding the influence of depression. It is suggested that interventions focused on depressive rumination have a direct impact not only on depression but also on suicidal ideation.

Keywords: depressive rumination, negative rumination, suicide ideation, depression

2.1: CBT for Child & Adolescent issues

35/T2.1/P/16: Application Of Third Wave Cognitive Behaviour Therapy Approach On Children In Conflict With Law: A Case Study Approach

Authors: Saranya Banerjee, Sanjukta Das

Contact: saranyabanerjeepsychology@gmail.com

Country: India

Abstract: The Juvenile Justice Act, 2015 defines a Child in conflict with law as one who is alleged or found to have committed an offence and has not completed eighteen years of age on the date of commission of such offence. Children in conflict with Law (CCL) represents one of the most vulnerable sections of our society. Rehabilitation of this group has recently become a concern for the policy makers and implementors. Some of our previous studies have indicated that CCL experience several emotional and behavioural problems, which later gets manifested as law violation. Thus, after the identification of those problems, this study aims to showcase the effectiveness of the third wave Cognitive Behavioural Therapy approaches in dealing with the behavioural and emotional problems of this group. The study will be done using case study method, whereby two case studies will be presented. This study will highlight the techniques and strategies that are helpful with children in conflict with law. This will also facilitate the development of a culturally adapted module of intervention. After the application of the intervention, detailed narratives of the children were taken to understand their changes from an experiential point of view. The findings were interpreted using a qualitative methods.

Keywords: Children in conflict with law, third wave cognitive behaviour therapy, case study, behavioural problems, emotional problems.

2.7: CBT for chronic and specific medical conditions

36/T2.7/P/17: Research trends and future challenges for self-management interventions for irritable bowel syndrome - Examination by systematic review

Authors: Toru Yasukawa, Kaho Tanobe, Minori Machida, Jun Tayama

Contact: chopitetsumusic803kfc@yahoo.co.jp

Country: Japan

Abstract: Purpose: Recently, there has been a lack of organization in research trends regarding self-management interventions for patients with irritable bowel syndrome (IBS). This study aimed to organize the evidence on self-management interventions for patients with IBS and to examine the challenges and future prospects of these interventions. Methods: A systematic

review was conducted following the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines. We included academic articles on self-management interventions for IBS that met the following eligibility criteria: (1) the subject being IBS, (2) the intervention being a self-management intervention, (3) the study being a randomized controlled trial, (4) the use of IBS severity as an efficacy index, (5) publication in a journal, and (6) being written in English. We searched the PubMed and PsycINFO databases. Results: Seven papers were extracted, of which, six showed that self-management interventions for patients with IBS reduced IBS symptom severity, while one reported that some participants showed no improvement in symptom severity. Regarding interventions, six studies used cognitive behavior therapy and one used patient education. Discussion: The mechanism by which self-management interventions improve IBS symptom severity has not been fully explained. Furthermore, no intervention studies on IBS have examined minors. To develop intervention programs with higher efficacy, studies focusing on the mechanism of action are necessary. Additionally, as the prevalence of IBS is higher in younger patients, efficacy studies should examine minors with IBS. Intervention studies based on the severity of IBS are required to provide further effective care for patients with this condition.

Keywords: Irritable bowel syndrome, self-management, systematic review

2.2: New trends in CBT for Anxiety disorders

47/T2.3/P/20: Examining the relationship between the three senses of self of the ACT and social anxiety disorder in daily life.

Authors: Yu Yokoyama, Rina Kobayashi, Yuta Kobayashi, Miyuki Kato, Koushi Maeda, Taro Uchida, Hiroaki Kumano

Contact: pippi_smile@akane.waseda.jp

Country: Japan

Abstract: Social anxiety disorder (SAD) has been reported that SAD patients activate certain assumptions when faced with social situations. Patients with SAD tend to engage in experiential avoidance, and acceptance and commitment therapy (ACT) is used to treat SAD. In ACT, there are three senses of self; Self-as-content, Self-as-process, and Self-as-context. Research has employed questionnaires to reveal the relationship between the experience of three senses of self and SAD, or between experiential avoidance and SAD. Therefore, this study examined the effects of the experience of three senses of self and experiential avoidance on SAD by employing an ecological momentary assessment. Twenty-one participants with high social anxiety engaged in fourteen days of measuring the degrees of the experience of three senses, experiential avoidance, and anxiety while facing social situations and immediately after experiential avoidance in their daily lives. The results revealed that Self-as-content and self-as-process positively predicted experiential avoidance in social interaction situations. The results of analysis of only those data that indicated a level of anxiety of 5 or higher when faced with a social situation, it was found that self-as-content increased the degree of anxiety in social situations, while Self-as-context decreased the degree of anxiety in social situations. The result further showed that experiential avoidance positively predicted anxiety immediately following experiential avoidance. With regard to anxiety immediately after experiential avoidance, it was found that Self-as-context as a viewpoint weakened anxiety immediately after experiential

avoidance, while the degree of anxiety in social situations strengthened anxiety immediately after experiential avoidance. A possible reason for the different results from those expected could be that the items being measured were inappropriate. This indicates the need to reconsider the items of Self-as-process, Self-as-context and empirical avoidance. In addition, it will intervene with Self-as-process and Self-as-context to see if social anxiety symptoms improve.

Keywords: Social anxiety disorder, Three senses of self, Experiential avoidance, Ecological momentary assessment, Acceptance and commitment therapy

2.3: Advances in treatment of mood disorders and suicidal behavior.

50/T2.3/P/22: Gut microbiomes changes post-DBT in NSSI patients

Authors: Chen Zixin, Ouyang Lichen, Wang Chun

Contact: chenzixinpsy@outlook.com

Country: China

Abstract: Aim and Methodology: Gut-bacteria cooperate with their hosts to regulate the nervous systems through the gut–brain axis. The mechanism of dialectical behavior therapy (DBT) and the role of gut microbiomes in non-suicidal self-injury (NSSI) patients is still unknown. Therefore, fecal samples were collected at baseline and post-DBT from 9 patients with depression with NSSI for 16S rRNA gene sequencing. Microbial alpha diversity and composition was assessed. The significance of differences in microbial composition was assessed using the Wilcoxon rank-sum test with the False Discovery Rate correction applied.

Summary of Results: The dominant bacterial phyla and genus with the highest relative abundances in both groups were the same: Firmicutes, Actinobacteriota, Bacteroidota, and Proteobacteria. The top ten most dominant bacterial genera with the highest relative abundances in both groups included Blautia, Bifidobacterium, Bacteroides, Faecalibacterium, Agathobacter, Subdoligranulum, Eubacterium_hallii_group, Escherichia-Shigella, Collinsella. No significance was shown in Sobs, Shannon, and Simpson. Microbial alpha diversity was stable, while beta diversity analysis demonstrated a significant difference before and after DBT. No significant differences were found in relative bacterial abundance at the phylum level. Still, a trend of reduced abundance of Actinobacteriota and increased abundance of Bacteroidota was observable after DBT ($p=0.17$, $p=0.61$). One bacterial genus showed a difference in abundance, which is Eubacterium_hallii_group, significantly reducing after DBT ($p<0.05$). After DBT, levels of Ruminococcus_gnavus_group and Klebsiella increased while the level of Fusicatenibacter decreased. ($p=0.46$, $p=0.35$)

Conclusions: The gut microbiome of NSSI patients changed after DBT, which indicated that DBT can the composition of the gut microbiota, leading to therapeutic effects.

Keywords: gut microbiome, gut-brain axis, dialectical behavior therapy, non-suicidal self-injury

2.1: CBT for Child & Adolescent issues

51/T2.1/P/23: Relationships Between Overadjustment, Values Clarification and Commitment, and Well-Being in Japanese Junior High School Students

Authors: Konoka Takeda, Eriko Takahashi, Taisuke Katsuragawa

Contact: 1631takekono@toki.waseda.jp

Country: Japan

Abstract: Introduction: The "overadjustment" is defined as "a state in which internal adaptation is difficult due to excessive external adaptation". Previous studies have shown that overadjustment is related to depression (Ishizu & Ambo, 2009; Kazama, 2015). The purpose of the present study was to clarify the relationships between overadjustment, values clarification and commitment (VCC), well-being in Japanese junior high school students.

Methods: The total of 104 students completed the following scales: Overadjustment Tendency Scale for Early Adolescence (Ishizu & Ambo, 2008), Values of Younger Ages Scale (Ishizu et al., 2020), which assessed VCC, and the Basic Psychological Needs Scale for School Life (Nishimura & Sakurai, 2015), which measured well-being.

Results: Result of exploratory factor analysis of overadjustment have found four-factors: "Consideration for Others", "Effort to Meet Expectations", "Self-Restraint," and "Sense of Self-Inadequacy," and six items were excluded. Based on Takeda et al. (2023), a confirmatory factor analysis was conducted on the higher-order factor model regarding "External Aspects" and "Internal Aspects". The resultant goodness of fit was substantial: CFI = 1.00, TLI = 1.01, RMSEA = 0.00, and SRMR = 0.08. Hierarchical multiple regression analysis was conducted with well-being as the dependent variable and VCC, External and Internal Aspects were added at each step as the independent variables based on Takeda et al. (2023). The results showed that all models were significant, and the coefficient of determination increased significantly in Step 1 and 3 ($\Delta R^2 = .54, p < .001$; $\Delta R^2 = .10, p < .001$). Model 3 showed that the effects of VCC ($\beta = .50$), External Aspects ($\beta = .25$) and Internal Aspects ($\beta = -.39$) on well-being were all significant ($p < .001$).

Conclusion: These results suggest that the overadjustment of junior high school students affects well-being through a process in which "external aspects" influences "internal aspects", and that well-being can be enhanced by promoting VCC.

Keywords: overadjustment, values clarification and commitment, well-being, junior high school students

2.1: CBT for Child & Adolescent issues.

53/T2.1/P/24: Efficacy of Integrative Exposure Response Prevention Intervention on transdiagnostic factors in children and adolescents with obsessive compulsive disorder: A Pilot Study

Authors: Trusha Pramod Shanbhag, Dr Daya Ram, Dr Preeti Gupta

Contact: trushashanbhag20@gmail.com

Country: India

Abstract: Introduction: Paediatric obsessive-compulsive disorder is common in children and adolescents. Coercive/Disruptive behaviour in OCD refers to situations in which a child or adolescent with OCD attempts to impose rules on others, particularly family members, because of his/her disorder. The transdiagnostic trait characteristics theorised to influence OCD are emotional dysregulation, intolerance to anxiety and anxiety sensitivity. Presence of poor resilience in children with obsessive compulsive behaviour might sabotage exposure tasks which is considered as a gold standard treatment for OCD. The integrative exposure response prevention therapy involves building resilience and challenging traps through self-compassion, optimism, acceptance, and emotional stability. It aims to cultivate motivation and detachment for cognitive based exposure response prevention and an overall reduction in symptoms.

Aim of the study: The present study aims to investigate the effects of Integrative Exposure Response Prevention intervention in reducing coercive disruptive behaviour in children with OCD.

Methodology: The pilot study was conducted with a pre-test and post-test design. The sample population included ten children and adolescents aged 9 to less than 18 years with obsessive compulsive disorder. Five adolescents among them received integrative exposure response intervention and five received only exposure response prevention intervention. The participants were evaluated at 2 weeks, termination of intervention and one month post intervention regarding coercive disruptive behaviour, anxiety, depression and severity of OCD. Data Analysis was performed in SPSS version 25.0.

Results: Results indicated reduction in scores of coercive disruptive behaviour and overall severity of symptoms in the group receiving integrative exposure response prevention intervention as compared to the group receiving only exposure response prevention intervention.

Conclusion: The integrative exposure response intervention could effectively decrease the severity of disorder. The integrative approach can be incorporated into the interventions designed for children and adolescents with OCD and lay a groundwork for further analyses in this regard.

Keywords: Coercive disruptive behaviour, obsessive compulsive disorder, Integrative exposure response prevention

2.2: New trends in CBT for Anxiety disorders

61/T2.2/P/26: The treatment outcome of the three days intensive group behavior therapy for Obsessive Compulsive Disorder

Authors: Hiroaki Harai, Ayaka Matsuura

Contact: director@harai.net

Country: Japan

Abstract: Aim: Behavior Therapy with Exposure and Response Prevention (ERP) is considered the first line of treatment for obsessive-compulsive disorder (OCD.) This fact is now well known to the general public, and the patient's need for experts with behavior therapy is ever-increasing in Japan. To meet the growing need for effective treatment, we developed the Three Days Intensive group behavior therapy for OCD, which we named 3DI at Harai Clinic. Here, we report the treatment outcome of the 3DI.

Subjects and Methods: From Jan. 2019 to Mar. 2023, we convened 47 times of 3DI, and 194 patients participated. Three to five patients participated in each group. The program of 3DI is; Day 1 Combination group discussion for three hours: This combination group consisted of patients and their family members. Patients were encouraged to speak of their fears and commitment to recovery. Family members or significant others were also encouraged to participate, and we coached them on responding to the patient's symptoms and requests. We started in-session ERP with easier targets, shaking hands with each other for mysophobia or borrowing valuable things from others for checkers. We assigned homework assignments for ERP.

Day 2 One daylong session for ERP: Patients are encouraged to search for feared objects around their environment, approach them, and touch them. For washers, therapists carried out in vivo exposure to dirty things. They were not allowed to wash their hands and were encouraged to spread contamination over their bodies and personal belongings. For checkers, therapists made a parody song whose lyrics contained the worst scenario of their fear and let them sing it in the group. Members were encouraged to applaud others when they experienced the full extent of their emotion during these exposures. We instructed individualized homework assignments of ERP.

Day 3 One daylong session for ERP and the future plan: The group discussed the experience from yesterday and after. Patients were encouraged to repeat the exposure tasks on day 2. Some patients might need skill training for basic grooming behaviors. In the afternoon, the group discussed their most cherished value in their life with the value card sorting exercise. Based on the chosen values, the group planned to continue the ERP exercise back home.

Results: Only three patients dropped out of the program. Among the 173 patients, over 80% achieved over 35% reduction of their symptoms. In summary, 3DI is a time-efficient treatment program with robust treatment outcomes.

Keywords: obsessive-compulsive disorder, group therapy, intensive outpatient program, exposure and response prevention, treatment outcome

2.1: CBT for Child & Adolescent issues

89/T2.1/P/35: Developmental trial of a mindfulness parenting support program for parents who are experiencing difficulties in relationships with adolescents in Japan

Author: Noriko Minamitani, Yasuko Takahashi, Yuki Matsumoto

Contact: norikominami41@gmail.com

Country: Japan

Abstract: Mindfulness interventions for parents alleviate parental and child stress and enhance psychological functioning of children (Burgdorf et al., 2019) . Adolescents have ongoing brain development (Powers & Casey, 2015) because great emotional upheaval, increases the risk of experiencing difficulties with emotional regulation. It is recognized that parents who help their children in their attempts to encourage emotional expression and problem-solving enhance their children's emotional regulation (Jin et al., 2017). However, the reality is that support for parenting is mainly targeted at parents with children in infancy, and little support is provided to parents with pre-adolescent and adolescent children in Japan, when the parent-child relationship often changes and problems become apparent. In contrast with this, mindful

parenting can be the basis for building good relationships between parents and children, keeping them away from excessive violent control over their children, which can also lead to abuse. This study has developed an online course with session contents that includes how to engage in parenting based on neuropsychological findings to create a safe and secure environment in the home. We conducted a trial of our program using a non-randomized and single-arm trial design, we recruited 12 parents divided them into 2 groups for the mindfulness parenting program, which comprised 8 sessions over two days. The result was assessed using a self-reported questionnaire and free descriptive feedback. It was observed that after attending the mindfulness parenting program, the participants' thoughts about their children's emotions and behavior changed, and that the quality of life of the participants improved. The effectiveness of mindfulness practices to connect parents and adolescents was suggested. The detail of training effects and limitations will be discussed on the day.

Keywords: mindfulness, parenting, adolescent, group program

2.15: Others

95/T2.15/P/39: Effect of ASD traits, perceived experiences of contingency for consultation, interpersonal anxiety, communication skills on help seeking in university students

Authors: Junichiro Kanazawa, Tomoya Nakamura

Contact: j16-kana@hoku-iryo-u.ac.jp

Country: Japan

Abstract: Aim and Methodology: University students with ASD tendencies are less likely to seek assistance (Sugioka et al., 2015) based on social anxiety (Ofuji et al., 2019) and communication skills (Kransy et al., 2003), resulting in negative impacts on their academic performance and job prospects. However, it is not only individual factors that influence help-seeking but also the accompanying experiences of seeking assistance and whether positive outcomes have been achieved. Therefore, this study conducted a questionnaire survey among university students to investigate the relationship between ASD tendencies, social anxiety, communication skills, and experiences of successful and unsuccessful help-seeking behaviors. Participants were 181 Japanese university students as (Mean Age=19.36, SD= 1.29). Measurements: AQ-J-10 (Kurita et al., 2005), Perceived Experiences of Contingency Scale (PECS; Maki et al., 2003), Social Anxiety Scale by Social Situation (SAS; Mohri & Tanno, 2001), Communication Skills Scale (CSS; Ikemoto & Daibo, 2007), Trait Help-Seeking Preferences Measure (THP; Tamura & Ishikuma, 2006).

Summary of Results: The results of multiple regression analysis revealed that with respect to the positive attitude toward seeking help in the THP (Tamura & Ishikuma, 2006), positive experiences in counseling situations ($\beta=.35$), anxiety towards the opposite sex ($\beta=.29$), and anxiety towards authority figures ($\beta=-.21$) significantly influenced it (Adjusted R² =.46). Additionally, concerns and resistance towards seeking help in the THP were significantly influenced by uncomfortable experiences in counseling situations ($\beta=.41$), positive experiences in counseling situations ($\beta=-.37$), and anxiety towards unfamiliar individuals ($\beta=.13$; Adjusted R²=.16). In both analyses, ASD tendencies and communication skills did not show significant associations with the THP.

Conclusions: In university students, it has been shown that the decision to seek help is influenced not by ASD tendencies and communication skills but by past positive and negative experiences in seeking advice and interpersonal anxiety. Given that prior counseling experiences up to high school graduation impact seeking assistance from university counseling services or faculty, delicate consideration is necessary when students seek help.

Keywords: Help-Seeking, Perceived Experiences of Contingency for Consultation, University Students.

2.15: Others

99/T2.15/P/41: Managing Frotteurism with Cognitive-Behavior Therapy: a Case Report. Since this is a case report, it should be considered as a poster

Author: Sweta Kumari Pathak

Contact: swetadlh60@gmail.com

Country: India

Abstract: Paraphilic disorder is a disorder that causes clinically significant distress or impairment to the individual or involved harm or risk to others while gaining sexual gratification. Frotteurism is one such disorder that involved within paraphilic disorder. It is one of eight such paraphilias listed in the DSM-IV. Frotteurism is an act of touching or rubbing one's genitals up against a non-consenting person in a sexual manner. The exact prevalence is unknown, but a wide prevalence range between 9% to 35% has been reported.

Cognitive behavior therapy has found successful in treating frotteurism. The present case report attempts to highlight the effectiveness of CBT on frotteurism. The combined treatment approach (CBT, Covert Sensitization & Pharmacology) resulted in the patient presenting with improvement in symptoms that interfered significantly with his life. The improvement through therapy were sustained for longer time as patient remained asymptomatic. The patient remained under follow up for seven months and found that combined treatment has better outcome than single interventional approach.

Keywords: Frotteurism, Cognitive Behavior Therapy, Covert Sensitization

2.8: CBT for eating disorders

104/T2.8/P/45: Psycho-cognitive Processes in the Transdiagnosis of Eating Disorders: a Systematic Review

Author: Zhang J, Qiao H

Contact: huifenaqiao@163.com

Country: China

Abstract: Objective: Different subtypes of eating disorders usually have anorexia, binge eating, and purging behaviors at the same time, but the ratio of symptoms is different. Or the same patient meets different classification criteria at different times. Christopher G. Fairburn proposed a transdiagnostic theory of eating disorders in 2003, shedding light on the core

psychopathology and maintenance mechanisms of eating disorders. This paper aims to further explore the cognitive processes involved in the transdiagnosis of eating disorders from different dimensions of cognition.

Methods: Taking metacognition, early maladaptive schemas, core beliefs, intermediate beliefs, and automatic thinking into consideration, the literatures related to eating disorders in the last 25 years were searched and screened in Psycinfo, Pubmed, Web of Science, Embase, and Cochrane databases.

Results: Twenty-one studies were finally identified. Fairburn argues that the core psychopathology of eating disorders is over-evaluation of eating, shape and weight and their control, and suggests four maintenance mechanisms: clinical perfectionism, core low self-esteem, mood intolerance, and interpersonal difficulties. We find that eating disorders have lower levels of metacognition in all subtypes compared to the healthy population. In particular, anorexia nervosa report more positive and negative beliefs about worry and the need to control thoughts. Compared to the normal population, different subtypes of eating disorders score significantly higher on the early maladaptive schemas and core beliefs. However, different symptom presentations and early maladaptive schemas or core beliefs are uniquely associated in eating disorders. Restrictive anorexia nervosa have more demanding standards and strive for perfection. Patients with binge eating and purging behaviors have relatively lower autonomy and identification, perceived incapacity and lack of self-control. There is still a need to further explore the different levels of cognition associated with mood intolerance and interpersonal difficulties in eating disorders, as well as intermediate beliefs and automatic thinking.

Conclusion: This review further supports the existence of an association between eating disorders and psychological cognition. Exploring the transdiagnostic process of eating disorders from a broader cognitive perspective will help us to enhance the assessment, prevention, and diagnosis of eating disorders, and to conduct cognitive-behavioral therapy with more precise and focused specialization characteristics, thus helping more patients to achieve recovery.

Keywords: eating disorders; transdiagnostic; metacognition; core beliefs; early maladaptive schemas

2.3: Advances in treatment of mood disorders and suicidal behavior

107/T2.3/P/47: Exploring Effective Components of Internet-Based Cognitive-Behavioral Therapy for Subthreshold Depression in University Students: A Factorial Trial

Author: Masatsugu Sakata, Rie Toyomoto, Kazufumi Yoshida, Yan Luo, Yukako Nakagami, Teruhisa Uwatok, Tomonari Shimamoto, Aran Tajik, Hidemichi Suga, Hiroshi Ito, Michihisa Sumi, Takashi Muto, Masataka Ito, Hiroshi Ichikawa, Masaya Ikegawa, Nao Shiraishi, Takafumi Watanabe, Ethan

Contact: sakata.masatsugu.3t@kyoto-u.ac.jp

Country: Japan

Abstract: Aim and Methodology: Internet-based cognitive behavioral therapy (iCBT) is effective for subthreshold depression. However, it is unclear which skills provided in iCBT packages are more effective than others. Such knowledge can inform the construction of more effective and efficient iCBT programs. To examine the efficacy of five components of iCBT

for subthreshold depression, we conducted a factorial trial using a smartphone app. We randomly allocated the presence or absence of five iCBT skills, including self-monitoring (SM), behavioral activation (BA), cognitive restructuring (CR), assertiveness training (AT), and problem-solving (PS). Participants were university students with subthreshold depression. We provided each iCBT intervention for 8 weeks. The primary outcome was the Patient Health Questionnaire-9 (PHQ-9) change from baseline to week 8. Secondary outcomes included changes in CBT skills, Generalized Anxiety Disorder-7 (GAD-7), and presenteeism.

Summary of Results: We randomized a total of 1093 participants. In all groups, participants had a significant PHQ-9 reduction from baseline to week 8. Depression reduction was not significantly different between the presence or absence of any component, with corresponding standardized mean differences (SMDs: negative values indicate specific efficacy in favor of the component) ranging between -0.04 (95% CI: -0.16 to 0.08) for BA and 0.06 (95% CI: -0.06 to 0.18) for AT. Specific CBT skill improvements were noted for CR and AT but not for the others. GAD-7 and presenteeism improved in all groups regardless of the presence or absence of each iCBT component.

Conclusions: Our findings suggest that there is no evidence-based recommendation for specific iCBT components yet, despite a significant within-group reduction of depression. Future research should scrutinize the amount and structure of components to examine.

Keywords: Subthreshold depression, adolescent, internet-based CBT, optimal component of CBT, factorial trial.

2.15: Others

113/T2.15/P/48: Relationship between Anxiety and Achievement Motivation among Students in Bangladesh

Authors: Pritu Saha, Dr. Mahfuza Khanam

Contact: pritu-2017214526@psy.du.ac.bd

Country: Bangladesh

Abstract: The present research observes the relationship between anxiety and achievement motivation. The aims of the study were to observe whether there was any relationship between anxiety and achievement motivation, whether anxiety and achievement motivation varies according to gender (male, female), type of institution (public, private) and current studying year (first year, final year). Convenient and purposive sampling of 160 adult students from universities was done. After giving proper instructions, Anxiety Measuring Scale and Rao Achievement Motivation Test questionnaires were given to fill up. Karl Pearson's Correlation Co-efficient and Two-way analysis of variance were used for analysis. The result shows that there is a low positive correlation of 0.186 between anxiety and achievement motivation, anxiety level varies with gender and type of institution and achievement motivation level doesn't vary with variables. This study confirms that to achieve prosper in life, we need minimum level of anxiety in our regular life. This study explains that anxiety level is higher among females and students from private universities, which can be confirmed by the data that females go through 1.5-2 times higher than males with anxiety disorders and also, physical and family stress and the students from public universities shows up higher anxiety level because of classes, study, financial pressures and lack of time for recreational activities.

The implications of this study could be vast by psychologists by managing anxiety of students by modifying dysfunctional thoughts, emotions and behaviors through CBT and helping to cope up with regular life difficulties in a better way by managing time for relaxation exercises, self-care and recreational activities.

Keywords: anxiety and achievement motivation

2.8: CBT for eating disorders

115/T2.8/P/49: Integrative Enhanced Cognitive Behaviour and Family Based Intervention in Adolescent Anorexia Nervosa in a Tertiary Setup: A Case Report

Author: Jasar Khan, Debaleena Ghosh, Dr. Nishant Goyal

Contact: psy.jasar@gmail.com

Country: India

Abstract: Introduction: Anorexia nervosa (AN) is characterised by deliberate weight loss through food restriction and/or compensatory strategies including excessive exercise, bingeing and purging. It encompasses distortion of body image and an intense fear of gaining weight despite emaciation. The present case report aims to demonstrate the application of CBT for AN to a 16-year-old female adolescent who presented with restricted intake of specific food items. She also presented with decreased social interaction, irritability and anger outbursts for a duration of 4 years. The adolescent was taken up for inpatient treatment at the child and adolescent psychiatry unit of CIP.

Cognitive and attentional biases towards food/eating/shape-related stimuli are a significant feature in eating disorders. The intervention seeks to help patients overcome difficulties by identifying and altering dysfunctional thinking, behaviour, and emotional responses/behaviours. CBT has been shown to be effective in treating many of the problems which are often a feature of AN (depression, anxiety, low self-esteem, obsessions/compulsions).

Aim of the study: The current study demonstrates the application of Integrated Enhanced CBT and Family Based Intervention in a case of adolescent Anorexia Nervosa

Methodology: The baseline assessments were conducted, short-term and long-term goals were collaboratively decided with both patient and the family members including improvement in the dietary intake, psychoeducation and nutritional counselling, and behavioural activation. The long-term goals focused on cognitive restructuring regarding distortions associated with self-worth and body image. Post intervention assessments were conducted and follow up based on OPD basis were continued.

Results: Results showed that the adolescent had significant improvement in terms of symptoms (relative increase in calorie intake and decrease in preoccupation with body weight, shape, and patterns of eating) as well as enhanced ability to regulate emotions. There was relative improvement in his socio-adaptive functioning. The adolescent reported improved awareness of the activities and techniques that can be used to cope up and ward off distressing thoughts and emotions.

Conclusion: The case study provides preliminary evidence for the possible application of Enhanced CBT in the treatment of Anorexia Nervosa. It also indicates that family-based techniques can make unique positive contributions to treatment. In this context, the use of integrative approach appears to enhance the effectiveness of treatment.

Keywords: Eating disorder in adolescents, anorexia nervosa, Enhanced CBT for eating disorder

2.2: New trends in CBT for Anxiety disorders

122/T2.2/P/53: Effect of ASMR Videos on State Anxiety and Affect among ASMR Experiencers

Author: Imtiaz Uddin Gazi, Dr. Akib Ul Huque

Contact: imtiazgazi1@gmail.com

Country: Bangladesh

Abstract: Autonomous Sensory Meridian Response (ASMR) is a tingling sensation frequently accompanied by calmness and relaxation. The purpose of this study was to examine the influence of ASMR video on state anxiety and affect, among those who can experience ASMR, and to explore why some people can experience ASMR whereas others can't. For screening ASMR experiencers, a sample of 142 undergraduate students, selected by convenience sampling, was divided into ASMR experiencers and non-experiencers, based on their propensity to experience ASMR. The ASMR experiencers were randomly assigned to the experimental group (N = 15) where the experimental intervention was an ASMR video and the control group (N = 15) where the experimental intervention was a neutral video. The participants were first shown an anxiety-inducing movie clip, followed by the measurement of state anxiety, and positive and negative affect, before and after the experimental intervention. An in-depth interview (N = 8) was conducted to explore the cognitive factors behind ASMR propensity. Repeated measures ANOVA indicated that watching ASMR video significantly reduced anxiety. Positive affect increased more for the experimental condition whereas negative affect reduced equally for both conditions. ASMR experiencers showed similar patterns of thought regarding ASMR triggers. This research clearly shows how two conflicting emotions or sets of emotions can't coexist. It also identifies the common themes of cognitive factors behind why some people can experience ASMR whereas some people can't. This research also shows how behavioural interventions like ASMR triggers such as the sound of raindrops falling or the sound of scissors cutting hair can help reduce anxiety.

Keywords: ASMR, ASMR experiencers, state anxiety, positive affect, negative affect

2.15: Others

135/T2.15/P/56: A case report on psychotherapy with PDD

Author: Tanvi Chitre, Anamika Srivastava

Contact: tanvichitre@gmail.com

Country: India

Abstract: Pervasive developmental disorders (PDD) are characterised by delays in social and communication skills as well as developmental milestones. Symptoms may include- difficulty in language comprehension and usage; difficulty relating to people, objects and events;

different play behaviour such as solitary play, attachment to inanimate objects; difficulty adapting to changes in routine. Additionally, hyper or hypo sensitivity to sensory aspects of the environment and/or repetitive body movements and behaviour patterns may be present. Symptom interaction with environment could result in interpersonal traumas (IPts) such as physical or sexual assault, bullying, harassment at home which are often associated with post traumatic stress. The aim of the case is to understand the impact of psychotherapy. The case is 20 years of age with chief complaints of difficulty maintaining eye contact, delay in speech and motor milestones, delay in scholastic skills development, repetition of words and irrelevant sentences, restricted and repeated behaviour, self-harm behaviour, over-eating. The case conceptualisation and specific techniques implemented will be discussed in the presentation.

Keywords: Pervasive developmental disorders, formulation, psychotherapy

2.15: Others

140/T2.15/P/59: Validation of the effectiveness of streamlined cognitive-behavioral therapy delivered in a short period of time made possible by video-assist

Author: Ikue Umemoto, Ikue Umemoto, Yasue Mitamura, Miyuki Makino, Asami Komazawa, Yoko Uehara, Hiromi Yamamoto, Hitomi Terashima, Kentarou Kimura, Takako Okumura, Tetsuji Cho, Akihiro Tokuyama, Masaya Ito, Masaru Horikoshi, Hironori Kuga

Contact: iumemoto@ncnp.go.jp

Country: Japan

Abstract: Introduction: Cognitive behavioral therapy(CBT) is recommended in guidelines for the treatment of depression in many countries. Although there are more than 1.2 million patients with mood disorders including depression in Japan each year, only about 38,000 requests for reimbursement for CBT have been submitted. This number does not suggest that CBT is being adequately provided in Japan. According to questions posed to physicians who have completed CBT training, one of the reasons preventing the implementation of CBT is the lack of clinic time. The average outpatient clinic time for psychiatrists in Japan is 8.6 minutes, which is not enough time to conduct CBT, which usually lasts around 50 minutes. In order to reduce therapist contact time, computer-assisted CBT and application-based CBT have been provided and their effectiveness has been verified. In this study, we develop and test the effectiveness of Streamlined CBT(SCBT) that reduces session time to about 20 minutes by having the therapist go through a CBT instructional video in homework.

Method: SCBT was added tips to Ministry of Health, Labour and Welfare(MHLW)'s manual on CBT for depression and developed following the book (Wright et al.,2010, Otto et al2011). Despite the time constraints of the CBT sessions, a well-defined framework and agenda were adhered to. The primary focus was on organizing the material to ensure its structured delivery. To enhance accessibility and enable participants to utilize the materials from their homes, an open-access website was established, providing comprehensive information in downloadable formats. A team of clinical experts collaborated to revise and compile these materials. The effectiveness of the SCBT program was evaluated in a multicenter feasibility study involving 14 adults with depression. The primary outcome was the change in Quick Inventory of Depressive Symptomatology (QIDS) scores over time, assessed at each session during the intervention period. Health Labour Sciences Research Grant funded this study (JP20GC1016).

Result: Several CBT worksheets were meticulously designed and developed. Specifically, worksheets intended for patient use at the conclusion of sessions were created as straightforward tasks, enabling patients to simply check off the items they needed to address. This delivery approach provided patients with a more manageable way to engage with tasks at home. We developed seven videos to demonstrate CBT strategies. The incorporation of this multimedia component, alongside other available resources such as case materials, patient handouts, textbooks, and worksheets, facilitated patient engagement, even among those facing greater challenges. In our feasibility study, a total of 14 participants (7 males and 7 females) were recruited, and after 16 sessions, a notable decrease in Quick Inventory of Depressive Symptomatology (QIDS) scores was observed.

Discussion: This study represents the first pilot study in Japan focusing on Short-Term SCBT, designed to deliver CBT sessions to depressed patients in a condensed timeframe. The efficacy of the developed SCBT program will be assessed from the perspectives of both patients and therapists, with a particular focus on its "efficiency." As of the presentation date, based on the collected data, we will also explore future issues and prospects.

Keywords: video-assist, depression, MHLW, Cognitive behavioral therapy

2.4: CBT for Women & Reproductive Health

141/T2.4/P/60: Relationship of Rumination, Behavioral Activation, and Reward Perception to Postpartum Depression During the COVID-19 Pandemic

Author: Miki Matsunaga, Junko Okajima, Kaichiro Furutani, Noriko Kusakabe, Nanako Nakamura-Taira

Contact: mikim@rikkyo.ac.jp

Country: Japan

Abstract: Introduction: The COVID-19 pandemic has led to increased social isolation for mothers, and rumination exacerbates postpartum depression in mothers with poor social support. Although behavioral activation can help to decrease their depressive symptoms, the mechanism by which behavioral activation reduces postpartum depression remains unclear.

Method: We examined the effects of rumination and behavioral activation on depression in postpartum women by examining a model mediated by subjective reward perception. A questionnaire was administered to 475 postpartum women (Age Mean=30.74, SD = 5.02) within one year of childbirth using an Internet survey. The measurements included perinatal depression, rumination, and behavioral activation, and we assessed environmental reward. To control for confounding variables, we assessed psychiatric history, social support, parenting perfectionism, and COVID-19 avoidance.

Results: We conducted a covariance structure analysis to test whether behavioral activation and avoidance/rumination affected postpartum depression directly, or whether this relationship was mediated by reward perception. The final model had an excellent fit to the data ($\chi^2(5) = 2.842$, ns., GFI = .998, AGFI = .992, CFI = 1.000, and RMSEA = .000). It showed that not only was there a direct positive path from rumination to postnatal depression but also a negative path via reward perception. In addition, the simultaneous multi-population analysis results showed that the goodness-of-fit index without equality restrictions was more appropriate regardless of the presence or absence of a history of mental illness. Comparing the path coefficients for the two

groups, the path from avoidance/rumination to reward perception was not significant for mothers with a history of mental illness and only the path directly affecting depression was significant.

Discussion: Rumination not only directly affects postpartum depression, but it could also indirectly increase postpartum depression by decreasing exposure to positive reinforcers. In addition, having a history of psychiatric illness and increases the effect of rumination on postpartum depression. These findings suggest that psychological interventions are needed to reduce rumination and increase contact with positive reinforcements to reduce postpartum depression, especially for high-risk groups.

Keywords: postpartum depression, rumination, behavioral activation, reward perception, perfectionism, COVID-19

2.15: Others

142/T2.15/P/61: Pharmacological evaluation of 16-imidazolyl androst-5-ene derivatives in LPS-induced neuroinflammation model of rats for their antiparkinsonian and antioxidant effects

Author: Ranjit Singh, Ranju Bansal

Contact: singhranjit_09@yahoo.com

Country: India

Abstract: Objective: Parkinson's disease (PD) is a chronic, progressive neurodegenerative disorder that predominately affects dopaminergic neurons of the substantia nigra region of the brain and is characterized by both motor and nonmotor dysfunctions. The motor symptoms of PD include resting tremor, muscle rigidity, and bradykinesia, while the deteriorated nonmotor system indicates neuronal loss and α -synuclein deposition in the central nervous system. The exact etiology of a disease is still unknown but the implications resulted from the combination of genetic and environmental factors. Recently, various literature reports mentioned that neuroinflammation causes the death of dopaminergic neurons and promotes both motor and nonmotor implications of PD.

Background: This present study is focused on the synthesis and pharmacological evaluation of novel heterosteroidal molecules as neuroprotective agents against neuroinflammatory cascade which is involved in the progression of neurodegenerative disorders such as Parkinson's Disease, and Alzheimer's Disease. In this present research work, the 16-imidazolyl substituted derivatives (I and II) of dehydroepiandrosterone have been synthesized and explored for their antiparkinsonian and antioxidant effects in the LPS-induced neuroinflammation model of rats. Method: Rats (Male Wistar) were anaesthetized with thiopental sodium (45 mg/kg, i.p.), stereotaxic surgery has been done and intranigral injection of LPS (10 μ g in 2 μ l) was infused into left substantia nigra using the Hamilton microsyringe. Compounds I and II were evaluated for behavioural alternations using an actophotometer, elevated plus maze, and block tests at a daily dose 2mg/kg after 21st day of LPS administration. Biochemical estimation of different makers for neuroinflammation, oxidative stress, and enzymatic immunoassays for proinflammatory cytokines TNF- α and IL-1 β has also been performed.

Results: The 16-imidazolyl substituted androst-5-ene derivatives (I and II) were characterized using IR, ¹H NMR. Both the compounds displayed anti-neuroinflammatory activity comparable to that of the standard drug dexamethasone.

Conclusion: The present study suggested that the compound I act potent anti-neuroinflammatory agent. Hence it could be useful for the prevention of PD and oxidative stress.

Keywords: Parkinson's Disease, Neuroinflammation, Dehydroepiandrosterone, Androst-5-ene derivatives, Neuroprotective agents

3.12: Others

143/T2.4/P/60: A Systematic Review of Cognitive-Behavioral Therapy (CBT) in Gita

Authors: Dr. Chinu Agrawal, Poonam Chouhan, Sri Abinaya Balasubramanian

Contact: feelingmindsindia@gmail.com

Country: India

Abstract: Cognitive Behavioural Therapy is a systematic and structured approach that targets the underlying cognitive patterns and behaviors that lead to stressors in order to assist people in managing their stress. CBT therapies have been shown to considerably reduce workplace stress and promote a healthier, more productive work environment by providing employees with appropriate coping techniques while promoting an optimistic attitude. CBT assists employees in recognising and challenging harmful thought patterns about their jobs, coworkers, and working environment. Employees are encouraged to address workplace issues with resilience, by replacing unrealistic reservations and anxieties with realistic and positive perspectives. Additionally, CBT gives employees useful coping mechanisms to handle stress in the moment, such as mindfulness and relaxation exercises, fostering emotional health and harmony at work. In essence, cognitive behavioral therapy (CBT) acts as a catalyst for employee empowerment, enabling individuals to develop a positive outlook, manage work-related stress, and build healthy relationships that ultimately contribute to increased job satisfaction and productivity.

The primary focus of CBT lies in identifying and modifying maladaptive thoughts and behaviors that contribute to stress, anxiety, and burnout, all of which significantly affect work-life balance. Through its structured and goal-oriented approach, CBT equips individuals with coping mechanisms and stress management techniques that can be applied in both professional and personal domains. By emphasizing the interplay between thoughts, emotions, and behaviors, CBT empowers individuals to reframe negative perceptions of work and foster a more adaptive and resilient mindset. This cognitive restructuring facilitates a shift towards prioritizing personal well-being alongside professional responsibilities.

Work stress could be related to the targets, job performance, work life balance, interpersonal relationship issues & working environment. This can lead to physical illness, as well as psychological distress and mental illness. However, sometimes with same work environment in a same organization, having same skill set in similar demographics, the employee's performance varies due to the Cognitive distortions. Many individuals use stress-coping strategies, such as sedentary activities, unhealthy eating behaviours, and smoking & alcohol

consumption, which do not contribute to long-term stress management. The conceptualization of work stress is important when developing interventions for the workplace.

The individual or group CBT interventions can be studied and a simple model can be worked upon for enhancing work performance-related factors and mental health for non-clinical working population. In addition to the interventions, the model needs to be integrated with the psycho-education and the training of the managers and leaders to help implement the sustainable model for effectiveness.

Keywords: CBT intervention, work-life balance, stress, sales, relationships

2.1: CBT for Child & Adolescent issues

153/T2.1/P/62: Integrating Play Therapy and Cognitive-Behavioral Interventions for Children's Behavioral and Emotional Well-Being

Author: Sarita Agarwal

Contact: sarita_arg1@yahoo.com

Country: India

Abstract: Integrating Play Therapy and Cognitive-Behavioral Interventions for Children's Behavioral and Emotional Well-Being.

Play Therapy is a form of psychotherapy that allows children to express themselves through play and creative activities. It is particularly effective in helping children especially younger ones, communicate their thoughts, feelings and experiences. Cognitive-behavioural interventions are goal-oriented and focus on identifying and changing problematic thought patterns and behaviors. When combined with play therapy they can address specific issues like restlessness, anxiety, depression, and can indeed be a powerful way to help children better understand and manage their thoughts, feelings and behaviors specifically children those with conditions like attention-deficit-hyperactive disorder (ADHD) and Conduct disorder.

Methodology: Involving techniques like puppets, role-play, and sand-tray in conjunction with CBT, to provide children with variety of tools and experiences to express themselves learn more adaptive behavioural reactions .

Results: The positive results in terms of children's increased understanding of their behavioural reactions and the consequences of their actions as well as their proactive efforts to shape their behaviour towards more positive outcomes, are indicative of the potential effectiveness of this approach.

Conclusion: Findings suggest that this combined therapy approach can be a valuable resource for professionals working with children who face behavioural and emotional challenges. It not only helps children express their desires and wishes in a supportive environment but also equips them with the skills to make more adaptive choices in their actions and reactions.

Keywords: Play Therapy, Cognitive behavior therapy, Attention Deficit Hyperactive Disorder, Conduct Disorder

2.11: CBT for obesity, psycho-somatic and body image issues

157/T2.11/P/63: What I eat in a day and why you should not: The role of influencers in development of body dysmorphia

Author: Dhruvi Shah

Contact: ts1989wtny.nr@gmail.com

Country: India

Abstract: The rapid proliferation of social media platforms has brought about a paradigm shift in the way individuals perceive and interact with their bodies. This research scrutinizes the influence of social media content like “What I eat in a day” and “my workout routine” in fostering body dissatisfaction and discontent among social media users. It aims to study the comparison mechanisms which are encouraged by influencers in intensifying body image concerns. It has been hypothesized that if an individual spends time watching, and copying these videos, they are more likely to develop body dysmorphia. This paper uses qualitative research methods to interview the audience/ followers of these influencers to understand the level of their impact on the belief system of the same. Following the advice of people on social media who sound like a professional and show their results as leading by example can make them more believable. Though these results are shown, the hidden facets of the process which are not documented led to unrealistic expectations in the followers of these influencers.

Keywords: influencer, social media, body dysmorphia, eating disorders

2.11: CBT for obesity, psycho-somatic and body image issues

165/T2.11/P/64: Relationship between excessive guilt and physical symptoms

Author: Yuki Arimura, Miku Matsuyama, Siqing Guan, Hiroaki Kumano

Contact: yukiarimu@asagi.waseda.jp

Country: Japan

Abstract: Aim and Methodology: Previous research has not examined the relationship between excessive guilt and physical symptoms in detail. This study aims to examine in detail the relationship between excessive guilt and physical symptoms. A questionnaire survey was administered to 170 students and analyzed using correlation and multiple regression analyses. Cornell Medical Index (CMI ; Kanehisa and Fukamachi. 1976) measured physical symptoms. And the guilt scale, prepared for self-accusation in adolescence(Kuwabara and Inoue, 2006) was used as an index to measure excessive guilt. The guilt scale consisted of four subfactors: self behavior criticism, social desirability, hypersensitivity toward others, and guilt consciousness.

Summary of Results:A positive correlation was found between guilt and the CMI($r = .38, p < .01$). Correlations between the four subfactors of guilt : self behavior criticism, social desirability, hypersensitivity toward others, and guilt consciousness and physical symptoms show that self behavior criticism was particularly positively correlated with the CMI($r = .39, p < .01$; $r = .22, p < .01$; $r = .18, p < .05$; $r = .31, p < .01$). A multiple regression analysis of the four subfactors of guilt and physical symptoms was performed using a stepwise procedure. As a result of variable selection, only self behavior criticism remained($\beta = 0.386, p < .01$).

Conclusions:Excessive guilt is related to general physical symptoms. Among the four subfactors of guilt, especially criticizing self behavior predict physical symptoms.

Keywords: Mind-body interaction, self behavior criticism, excessive or inappropriate guilt, physical symptom

2.9: CBT for Cancer, pain management, and Palliative care

176/T2.9/P/67: Aversion Ambiguity and Cancer Diagnosis: A systematic review of the relation between cognitive bias and cancer prognosis.

Author: Aishwariya Chakraborty, Dr. Deepshikha Ray

Contact: aishwarjyachakraborty65@gmail.com

Country: India

Abstract: Background. Uncertainty regarding the diagnosis of cancer is an important problem and is a major debate in health care. A major reason for uncertainty in cancer diagnosis and related treatment decisions is “ambiguity”—uncertainty due to limited reliability, credibility, or adequacy of information. It is a significant problem in cancer care as people appraise choice options negatively and avoid decision-making. The cognitive bias of “ambiguity aversion” (AA), dominates numerous decision-making domains, through cognitive, emotional, and behavioural manifestations, from a lack of trust in physicians and informed decisions to a preference for self-treatment. Additionally, an existing diagnosis of a prior mental health condition can complicate AA. However, understanding of “ambiguity aversion” is limited, partly because of the absence of a unanimous coherent concept of uncertainty.

Objective. This article aims to systematically review how “ambiguity aversion” as a cognitive schema is related to the timely diagnosis of cancer and the effect it may have on the prognosis of cancer.

Method. Given that the literature on uncertainty in cancer care is fragmented, insufficiently translating existing knowledge into clinical practice, this systematic review of the literature will include AA and all cancer types. MEDLINE, Web of Science, SCOPUS, and ProQuest Dissertations and Theses databases are currently being searched.

Conclusion. People’s intention with health uncertainty can vary depending on internal factors and may be significantly associated with a large prevalence of untreatable cancer prognosis. Appropriate psychoeducational strategies can address timed diagnosis.

Keywords: Aversion ambiguity, Cognitive bias, Cancer screening, Early diagnosis, Prognosis

2.15: Others

187/T2.15/P/68: A meta-analytic review of the relationship between early maladaptive schemas and depression in adults

Author: Paula I. Stroian, Daniel O. David

Contact: paulastroian@psychology.ro

Country: Romania

Abstract: Early maladaptive schemas (EMSs) have been proposed as vulnerability factors for psychological problems, but it is not yet clear which EMSs are the most relevant in depression. The present study aimed to estimate the magnitude of the relationship between EMSs and

depression in adults, both as bivariate and unique relationships. A systematic search of the databases PsycINFO, Scopus, Pubmed and ProQuest Central was performed, resulting in the identification of 96 peer-reviewed studies performed on 27,586 participants. The random-effect meta-analyses of bivariate relationships found all EMSs to be positively correlated with depression. The effect size estimate for the global association between EMS and depression was moderate ($r = 0.41$, 95% CI 0.38-0.43, $p < .0001$), as were the associations between most EMSs and depression. A meta-analytical structural equation model regressing depression on seven EMSs (Abandonment, Social Isolation, Defectiveness, Failure, Dependence/Incompetence, Vulnerability to Harm and Negativity/Pessimism) found all included EMSs to uniquely contribute to depression. Our results indicate that certain EMSs encompassing negative views of one's ability to connect with others perform or function independently may be the most relevant to depression. However, the results are based on cross-sectional data only and are highly heterogeneous, which warrants further research. The implications of our findings are discussed.

Keywords: early maladaptive schemas, depression, meta-analysis, meta-analytical structural equation modeling, schema therapy

2.5: CBT treatment for substance abuse and addictive behaviours

192/T2.5/P/71: Efficacy of Cognitive Behavioral Therapy and EEG Neurofeedback in Alcohol Use Disorder - A single case report

Authors: Kashyapi Thakuria, Dr Cathlyn Niranjana Bennett, Pooja Bharadwaj

Contact: kashyapi.thakuria@res.christuniversity.in

Country: India

Abstract: Background : Alcohol use disorder (AUD) is a major global public health concern that has detrimental effects on both physical and mental health. While the dual treatment approach of pharmacotherapy and psychotherapy has been demonstrated to be an effective means of treating alcohol use disorder (AUD), further therapeutic evidence is still needed to demonstrate psychosocial (quality of life) and clinical outcomes (sobriety maintenance).

Aim : The purpose of this study is to determine the efficacy of neurofeedback therapy as a complementary treatment to cognitive behavioral therapy (CBT) in treating an individual with AUD.

Method :- The cognitive-behavioral paradigm is used to analyze the case of a young adult who has been diagnosed with alcohol use disorder. In this case, the psychotherapy involved a structured approach with 10 weeks of bi-weekly sessions focused on cognitive restructuring and coping skills. Additionally, 20 sessions of Neurofeedback were provided, consisting of ten sessions of Peniston-Kulkosky and ten sessions of Scott-Kaiser Modification. Screening measures used included AUDIT and MSME. The AUDIT and MMSE screening tools were employed. Pre-post and baseline measures for the drinker's inventory of consequences (DrInc) and quality of life (QoL) were obtained.

Findings : During the follow-up sessions, there was a significant 33% decrease in alcohol intake after 10 weeks, leading to a positive impact on the quality of life. This continued to improve, with a 65% decrease in alcohol intake during the 20-week follow-up session.

Conclusion: Regular monitoring of alcohol use patients during and after structured psychotherapy is crucial due to the high risk of relapse.

Implication: CBT, when combined with other therapies, is effective in addressing alcohol use. However, more evidence is needed to support neurotherapeutic intervention strategies targeting addiction disorders and stress-induced behavioral tendencies.

Keywords: Alcohol use disorder (AUD), Cognitive Behaviour Therapy (CBT), EEG Neurofeedback, Quality of Life (QoL)

2.1: CBT for Child & Adolescent issues

193/T2.1/P/72: Cognitive Behavioral Therapeutic Approach of behavioral and emotional issues: A Single Case Report

Authors: Pooja Bharadwaj, Kashyapi Thakuria

Contact: mail.poojabharadwaj@gmail.com

Country: India

Abstract: Emotional neglect is a form of early life maltreatment (ELM) that can have a significant impact on children's social, emotional functioning and cognitive development. The emotional needs of children can be undermined by caregivers who fail to provide them with the comfort, affection, and support they require.

Aim: In light of this, projective tests like the "draw a person test" can be used to uncover a child's internal conflicts and offer further emotional state insight in order to gain a comprehensive understanding of the complexities of their cognitive, emotional, and overall personality issues. The purpose of the study is to determine the efficacy of CBT approach in treating children with varied behavioral and emotional concerns.

Method: In the present case study, a primary school student who exhibited behavioral concerns is examined using the Draw-a-Person test. CBT was incorporated as a therapeutic modality aimed at improvement of behavioral and emotional difficulties. In this case, the psychotherapy approach with 10 weekly sessions along with 2-3 follow up sessions after every 15 days was incorporated which focused on restructuring the cognitions and improving behavioral skills and emotional development. The CTQ-SF was used for baseline assessment as well as to assess pre and post measures.

Results: Therapeutic intervention using the techniques of CBT helped in the enhancement of personality as a whole in emotional neglect of a child. During the follow-up sessions, there was a significant control of behavioral concerns executed by the child, leading to improvement in the management of the overall factors of the personality in the child.

Keywords: CBT, Emotional Neglect, Cognition Deficits, Personality, Social Dysfunction, Early Life Maltreatment

2.1: CBT for Child & Adolescent issues

196/T2.1/P/74: A Preliminary outcome of Internet-based Cognitive Behavioral Skill Training for Youth at-risk of Anxiety: a feasibility study

Authors: Sirirat Ularntinon, Warisa Jaturawattana

Contact: siriratul@gmail.com

Country: Thailand

Abstract: Objective: This pilot study sought to assess the feasibility and effectiveness of Internet-based Cognitive Behavioral Skills training for adolescents at risk of anxiety disorders. Methods: Adolescents aged 12-15 years participated in an online cognitive behavioral skills training program conducted between May 1st and November 30th, 2021. The Thai version of the Screen for Child Anxiety Related Disorders (SCARED) was utilized to evaluate anxiety symptoms at baseline and 8 weeks post-intervention. Feasibility was evaluated through a questionnaire developed by the authors.

Results: Eight participants, with a mean age of 13.25 years, completed two sessions of the Internet-based intervention. SCARED scores exhibited a 62.5% reduction (n=5) in child self-reports and a 75% reduction (n=6) in parent reports, particularly in those with a baseline anxiety score of 40 or higher. However, outcomes were inconclusive for individuals with moderate anxiety symptoms (baseline score 25-35). More than half of the participants reported high to the highest satisfaction with the program.

Conclusion: Internet-based cognitive behavioral skills training for at-risk youth demonstrates promise as an initial intervention. Its potential for facilitating physical distancing and minimizing resource utilization positions it as a viable option for effective telepsychiatric intervention, particularly amidst the COVID-19 pandemic.

Keywords: Anxiety, CBT, telepsychiatry

2.1: CBT for Child & Adolescent issues

202/T2.1/P/77: Psychometric property of the Japanese translation of the Brief Emotional Distress Scale for Youth

Authors: Sho Okawa, Yuko Urao, Susan H. Spence, Ronald M. Rapee, Hiroyuki Ito, Masatsugu Tujii, Eiji Shimizu

Contact: show0706@gmail.com

Country: Japan

Abstract: Aim and Methodology: Anxiety and depression are the most common mental health problems for children, which share a common factor of emotional distress. Brief measures are crucial to assess emotional distress in youth and to monitor symptom improvement during therapy sessions. However, no brief measure to assess emotional distress in youth has been validated in Japan. The purpose of this study was to examine the reliability and validity of the Brief Emotional Distress Scale for Youth (BEDSY) among Japanese Children. A total of 5976 children in elementary school or junior high school (grades 3 to 9) completed the Japanese translation of the BEDSY and a short version of the Depression Self-Rating Scale for Children (DSRS-C). Ethical approval was granted by the Research Ethics Committee of the Graduate School of Medicine, Chiba University.

Summary of Results: Exploratory structural equation modeling for the BEDSY supported a bi-factor model, with anxiety and depression scores loading on a general emotional distress factor, similarly to the original Australian sample. The BEDSY total score and BEDSY depression item score correlated significantly and moderately with the Short DSRS-C, with a significant but weaker correlation between the BEDSY anxiety item score and the Short DSRS-C. Omega

Hierarchical coefficient for the general factor was .92, explaining 82.4% of the total variance in the data, with 6.9% and 10.6% of the unique variance explained by the depression and anxiety factors, respectively. Item response theory analyses indicated that each item of the BEDSY was reliable and informative, especially for children with above-average emotional distress.

Conclusions: These results supported the factorial validity, convergent validity, and reliability of the BEDSY for the Japanese population. The Japanese translation of the BEDSY may have potential utility for screening emotionally distressed children in a community setting and for progress monitoring during therapy sessions.

Keywords: youth, emotional distress, anxiety, depression, Japan

2.2: New trends in CBT for Anxiety disorders

219/T2.2/P/82: Mindfulness and self-compassion focused Acceptance and Commitment Therapy for social anxiety with depressive symptoms and shame schema: A case study

Authors: Yeji Yang, Ye-Seul Kim, Heewon Seo, Kee-Hong Choi

Contact: yaeji0917@korea.ac.kr

Country: Korea, South

Abstract: Introduction: After the COVID-19 pandemic, mental health issues of young people, such as depression and social anxiety, have escalated. Particularly, individuals experiencing both social anxiety and depression concurrently exhibit more negative self-perceptions, and depressive symptoms influence the persistence and recurrence of social anxiety. The key characteristics shared by depression and social anxiety encompass shame and negative self-evaluation. This study aims to implement a mindfulness and self-compassion focused group acceptance and commitment therapy (MSACT) for individuals experiencing social anxiety, shame and depressive symptoms and investigate its feasibility and effectiveness.

Method: A total of 5 individuals aged 19 to 34 experiencing social anxiety, shame and depressive symptoms were enrolled in a group MSACT program. The intervention comprised a 10-week ACT program focusing on mindfulness and self-compassion. The analysis was conducted for 4 participants who completed all sessions ($M = 25.5$, $SD = 3.87$, 50% women). Measures included Young Schema Questionnaire (YSQ), Social Interaction Anxiety Scale (SIAS), Social Phobia Scale (SPS), Social Anxiety - Acceptance and Action Questionnaire (SA-AAQ), Brief Fear of Negative Evaluation Scale (BFNE), Self-Compassion Scale – Short Form (SCS-SF), and Mindful Attention Awareness Scale (MAAS).

Results: The SIAS, SPS, and BFNE scores decreased after the intervention, with large effect sizes (Hedges' g ranging from 1.15 to 1.58 at pre- to post-treatment). The SA-AAQ, SCS-SF, and MAAS scores increased after the intervention, with medium to large effect sizes (Hedges' g ranging from 0.53 to 1.54 at pre- to post-treatment). Visual inspection suggested systematic changes in acceptance and action to social anxiety symptoms. Of all participants, 50% (SPS, SIAS), 66% (SA-AAQ, BFNE, SCS-SF, MAAS) experienced clinically significant change at post-treatment, as analyzed by reliable change indices (RCI) and clinical significance analysis (CSC).

Conclusion: The results suggest that MSACT can be an effective treatment for individuals with comorbid social anxiety, shame, and depressive symptoms.

Keywords: Acceptance and commitment therapy, Mindfulness, Self-compassion, Shame, Social anxiety, depression

2.7: CBT for chronic and specific medical conditions

225/T2.7/P/86: Evaluation of Cognitive Behavioural Therapy for Neurobehavioural Sequelae Following Traumatic Brain Injury

Authors: Tanya Zakhmi, Dr. Manju Mohanty, Dr. S.K. Gupta, Dr. Debasish Basu, Dr. Navneet Singla

Contact: tanya2402z@gmail.com

Country: India

Abstract: Aim: The purpose of this study was to investigate the effectiveness of cognitive behavioural therapy for alleviating neurobehavioral sequelae following traumatic brain injury using case reports.

Background: Traumatic Brain Injury is one of the most common causes of disability and injuries in India. Individuals who survive a brain injury often experience long term cognitive and behavioural sequelae. Emotional and behavioural disturbances following a head injury can have a significant impact on an individual's quality of life, community integration, social functioning and return to work. CBT is considered a potentially efficacious treatment for emotional and behavioural symptoms like aggression, anxiety, depression etc. However, most studies of CBT have been done on patients with mild head injury. Two case studies are provided to illustrate the efficacy of cognitive behavioural therapy on severe head injury patients.

Methodology: A 24-year-old male sustained a severe head injury following a road traffic accident. He presented with complaints of aggression, irritability, anxiety, difficulty concentrating and memory deficits. He also showed reduced social functioning and problems in community integration. A 39-year-old male with a severe head injury presented with complaints of irritability, depression, speech deficits, memory impairment and right hemiparesis. Both patients received 12 weekly sessions of CBT in adjunct to neuropsychological rehabilitation. Outcome was assessed using Generalized Anxiety Disorder Questionnaire, Patient Health Questionnaire, Community Integration Questionnaire, Quality of Life after Brain Injury and Mayo Portland Adaptability Inventory.

Results: The two patients demonstrated positive treatment response on measures of anxiety and depression. The findings revealed that CBT is effective in reducing symptoms of anxiety and depression and improving the overall quality of life and community reintegration of TBI patients.

Keywords: Traumatic Brain Injury, Neuropsychology, Anxiety, Quality of Life, Rehabilitation

2.7: CBT for chronic and specific medical conditions

228/T2.7/P/87: A CBT Perspective on Psychosocial Factors and Adherence to Gluten-Free Diet in Celiac Disease

Authors: Niharika Dadoo, Prof. Bikash Medhi, Dr. Ajay Prakash, Prof. Manish Modi, Prof. Sanjay Kumar Badada, Prof. Sameer Vyas, Dr. Vishal Sharma, Prof. Manju Mohanty

Contact: niharikadadoo123@gmail.com

Country: India

Abstract: Aim: To understand the role of psychosocial factors and adherence to gluten free diet in celiac disease from a CBT perspective.

Background and Methodology: Celiac disease (CD), is an autoimmune disorder, triggered by the consumption of gluten and presents a unique set of psychosocial challenges for individuals beyond the physical symptoms. The diagnosis and subsequent dietary restrictions can lead to stress, anxiety, social stigma, and emotional distress. Non-adherence to a gluten-free diet (GFD) remains a prevalent issue, obstructing symptom control and long-term health outcomes. Conventional medical approaches often overlook these psychosocial aspects and focus on the physical symptoms.

In this conceptual model, observation and elements of cognitive behaviour therapy (CBT) are used while counselling the outpatients (endocrinology and gastroenterology) to overcome the following psychological barriers: 1. Dietary distress, 2. Low perceived self-efficacy, 3. Negative thoughts and beliefs, 4. Stress and anxiety and 5. Social stigma

A conceptual framework for utilizing CBT:

1. Conducting a thorough assessment
2. Psychoeducation and Cognitive restructuring
3. Behavioural activation: Developing coping strategies and skills to manage stress
4. Emotional regulation
5. Relapse prevention

Summary: CBT can be effective in complementing conventional medical management and improving the quality of life for individuals by providing individuals with the knowledge, skills, and coping mechanisms to manage their condition.

Conclusions: CBT can empower individuals with CD to achieve long-term adherence to a GFD and improve their overall health and well-being. More research is required in this area to enhance the well-being of people with celiac disease.

Keywords: Celiac disease (CD), Cognitive behaviour therapy (CBT), Gluten free diet (GFD)

2.2: New trends in CBT for Anxiety disorders

233/T2.2/P/88: Verbal Value Discounting in Obsessive-Compulsive Disorder (OCD)

Authors: Miyo Okajima, Yuya Hirata, Chika Yoshikawa, Yusuke Kataoka

Contact: miyo.okajima@gmail.com

Country: Japan

Abstract: Background: In the treatment of OCD, there are numerous patients who struggle with or discontinue the traditional ERP method. Moreover, training therapists to become

proficient in exposure therapy is challenging. Although OCD was removed from the anxiety disorders category in DSM-5, this was due to its reclassification as a behavior akin to habits formed from repeated actions, such as skin picking, rather than as a phobia. In OCD, self-reinforcement occurs due to prolonged and frequent engagement in compulsive behaviors like washing or rumination, making the interruption of these behaviors a priority. Naturally, interrupting compulsive behaviors involves elements of exposure, meaning even small exposure tasks are effectively implemented. However, interrupting rumination is not simple. To address these challenges, we have developed and refined over the past decade a method known as Verbal Value Discounting (hereinafter, "the method"), proposing it as a new approach to OCD treatment.

Procedure of the Method: The specific instruction involves thinking of an obsessive thought (e.g., "Touching will cause illness") and responding lightly in an affirmative manner (e.g., "Sure, sure", "Oh, really?"). The manner of response is crucial, aiming to belittle the obsessive thought as much as possible and to postpone compulsive actions. Patients are taught to simply respond affirmatively without necessarily stopping the compulsive behavior. This method can be taught and practiced within a 10-minute session. Repetition training is encouraged as homework. Other tasks to be performed alongside this method include simplifying compulsive behaviors, such as slightly reducing washing actions or breaking rules. The method is recommended for implementation in the initial stages of treatment. Exposure tasks may be set after the method, if necessary.

Study 1 - Talking Back to Obsessive Thoughts: Qualitative evaluation of the effectiveness based on the length and expression of the responses.

Study 2 - Target of the Technique: Qualitative data collection and verification using the method randomly regardless of the age at the initial consultation.

Study 3 - Robustness of the Technique: Verification by having beginners in cognitive-behavioral therapy implement the method.

Results of Study 1: Short responses were found to be more effective than longer ones. Phrases that playfully affirmed the obsessive thoughts while also implying their dismissal worked well. Expressions like "It's okay" or "Don't worry" were counterproductive as they denied the obsessive thoughts despite the fear, and failed to stop rumination. On the other hand, phrases such as "Oh, really?", "Yeah, right...", "Hmmm", and "I see..." were effective. Allowing patients to choose their preferred response from these options increased their motivation.

Results of Study 2: Effective for all subtypes of OCD, with no age restriction. In fact, children under 10 could learn it faster with proper explanation. Patient feedback after 1-2 weeks of implementation included reduced fear of obsessive thoughts and finding compulsive behaviors bothersome. After 2-3 months, patients felt a change in unrealistic threats and successfully reduced compulsive behaviors, making it easier to take on desired exposure tasks.

Results of Study 3: Psychologists with only experience in interrupted OCD treatments managed to reduce symptoms by half in teenage patients after three sessions using the method. Additionally, two psychologists, beginners in cognitive-behavioral therapy, successfully treated several OCD patients within six months.

Discussion: The method aims to train patients in-session to form an attitude that devalues negative imagery by responding nonchalantly to language-based obsessive thoughts, thereby distinguishing between confused states of imagery and reality. While nicknaming compulsions is recommended for children, the method's instructions are simpler for those who struggle to create images. The method, which disrupts the fight or flight response to obsessive thoughts, contributed to symptom improvement and presented as a less burdensome, more approachable

task for patients compared to traditional ERP. It also proved feasible for beginners in OCD treatment. The method eliminates the need to create anxiety hierarchies, potentially shortening treatment duration. Our experience shows that high-intensity exposure tasks can disassociate patients from the situation, preventing lasting exposure effects. Even with lower intensity, cognitive avoidance continues during exposure through self-reassuring language actions, leading to increased rumination and potentially severe relapses. As obsessive thoughts represent core beliefs that are difficult for patients to accept, coexistence seems possible only by devaluing these beliefs, making a non-confrontational attitude like that fostered by the method a viable treatment option.

Keywords: Rumination, OCD, ERP, Verbal Value Discounting

2.2: New trends in CBT for Anxiety disorders

234/T2.2/P/89: Cognitive Behaviour Therapy: A case study in obsessive compulsive disorder (OCD) with Depression

Authors: Reena Minj, Dr. Amool Ranjan Singh

Contact: minjreena7@gmail.com

Country: India

Abstract: Background: Obsessive Compulsive Disorder (OCD) affects 0.5–2% people many of whom are resistant to conventional treatments. Case report: The aim of this study is to assess the effect of Cognitive Behaviour Therapy in a 45-year-old male with OCD with Depression. For the present study a single subject experimental design was used. A total of 12 sessions were conducted. The components of the therapy were psycho-education, JPMR, Cognitive Restructuring and Exposure and Response Prevention. In the initial sessions psycho-education was done and JPMR was trained. In middle sessions Cognitive Restructuring was used. And in Vivo Exposure and Response Prevention was used in final sessions. Discussion: YBOCs was used to assess the severity of Obsessive Compulsive Disorder (OCD) and BDI was used to assess the severity of Depression. In the pre-assessments the scores obtained were severe in both YBOCS and BDI. In the post-intervention assessment, the scores obtained were reduced significantly. However, after maintaining well for 1 year 9 months, his depression relapse again and in the assessment, he scored moderate in BDI and CBT was used for his depressive symptoms, a total of 8 sessions were used. After post-intervention his score on BDI was reduced. In follow-up sessions, the patient showed no signs of relapse and he is maintaining well.

Keywords: Obsessive Compulsive Disorder (OCD), Depression, Cognitive Behavioural therapy (CBT).

2.5: CBT treatment for substance abuse and addictive behaviours

240/T2.1/P/93: Substance Use Disorders and the Scope of Cognitive Behaviour Therapy

Author: Mansi Patel

Contact: mansipatell@gmail.com

Country: India

Abstract: Substance abuse is a condition which has grappled a considerable percentage of the Indian population. Additionally, it is also seen that this condition frequently prevails as a comorbidity as well. Cognitive Behaviour Therapy (CBT) as a method of treatment has successfully established its effectiveness for various disorders; emerging as a promising avenue for addressing the complex interplay of cognitive, emotional, and behavioral factors inherent in Substance Use Disorders (SUD). While it has shown positive results for treating substance related disorders, there is fairly limited research investigating the nuances of its effectiveness for the same. This paper focuses on case studies of three adults having SUD. These case studies provide an in-depth exploration of the patients' journey through SUD, documenting the way it manifested, the therapeutic process and outcomes. Preliminary findings suggest that CBT demonstrates promising outcomes in addressing SUDs. However, the dynamic nature of its clinical expression in every case is a crucial factor to be addressed, highlighting the importance of individualized care. This research contributes to the evolving landscape of addiction treatment by offering a comprehensive evaluation of CBT's applicability and potential limitations in the context of SUDs. The study provides a robust foundation for further research and informs clinical practices in the ongoing battle against substance abuse.

Keywords: Substance use disorder (SUD), Cognitive Behaviour Therapy (CBT), addiction, case study.

2.1: CBT for Child & Adolescent issues

241/T2.1/P/94: Integrating Cognitive-Behavioral Therapy with Emotional Management Strategies for Child and Adolescent Well-Being

Author: Aakriti Wadhwa

Contact: aakritiwadhwa42@gmail.com

Country: India

Abstract: This abstract offers a comprehensive exploration of the synergistic application of Cognitive-Behavioral Therapy (CBT) and emotional management strategies in addressing the unique psychological needs of children and adolescents, with a particular focus on anger and happiness. Recognizing the intricate interplay between cognitive processes and emotional experiences during this developmental stage, the abstract delves into the theoretical foundations and practical implications of integrating CBT with targeted emotional regulation techniques.

The abstract highlights key components of CBT, such as cognitive restructuring and behavior modification, as powerful tools for addressing a range of issues prevalent in childhood and adolescence, including anxiety, depression, and behavioral disorders. Emphasis is placed on the adaptability of CBT to cater to the cognitive and emotional development of young individuals, fostering resilience and coping mechanisms.

Furthermore, the abstract explores specific emotional management strategies, drawing attention to interventions designed to help children and adolescents navigate the complexities of anger and happiness. These strategies encompass emotion identification, expression, and regulation, providing a holistic framework that complements CBT techniques. The integration

of emotional management within CBT aims to empower young individuals with a well-rounded skill set to cope with emotional challenges and enhance overall well-being.

Empirical evidence supporting the combined approach is discussed, underscoring the effectiveness of the integrated model in clinical settings. The abstract also addresses the importance of involving parents and caregivers in the therapeutic process, fostering a collaborative approach to emotional health.

In conclusion, this abstract provides a nuanced perspective on the integration of CBT and emotional management strategies, specifically targeting anger and happiness, as a comprehensive and tailored therapeutic approach for children and adolescents. The insights presented serve as a valuable guide for mental health professionals, educators, and caregivers seeking to promote the emotional well-being of young individuals in a holistic manner.

Keywords: Cognitive-Behavioral Therapy (CBT), psychological needs of children and adolescents, emotional management

2.2: New trends in CBT for Anxiety disorders

242/T2.2/P/95: Insomnia as a predictor of treatment outcomes in adolescents receiving concentrated exposure treatment for OCD

Author: Solvei Harila Skjold, Kristen Hagen, Michael G. Wheaton, Håvard Kallestad, Kay Morten Hjelle, Thröstur Björgvinsson and Bjarne Hansen

Contact: solvei.harila.skjold@helse-bergen.no

Country: Norway

Abstract: Background: Research suggests that individuals with obsessive-compulsive disorder (OCD) frequently have insomnia. Some previous studies have suggested that insomnia may predict treatment outcomes, but the research, especially on adolescents, is scarce. The aim of this study is to look at the prevalence of insomnia in an adolescent OCD-patient sample, study the correlation between OCD and insomnia, and test if levels of insomnia at baseline predicts outcomes for adolescent patients receiving the Bergen 4-Day Treatment (B4DT) for OCD. Methods: Forty-three adolescent OCD-patients, who received B4DT were selected for this study. Treatment outcome quantified as change in Children Yale-Brown Obsessive Compulsive Scale (CY-BOCS) scores across time from pre- to post-treatment and 3-month follow-up. Insomnia symptoms were measured by the Bergen Insomnia Scale (BIS). Linear Mixed Models were used to examine the relationship between BIS and change in CY-BOCS. We controlled for symptoms of general anxiety disorder measured by GAD-7, and depression symptoms measured by PHQ-9. Results: In this sample, 68.4 % of the patients scored above the cut-off for insomnia on BIS. There was a moderate correlation between the baseline CY-BOCS and BIS that did not reach statistical significance ($r=.32$, $p=.051$). High BIS scores before treatment were significantly associated with poorer treatment outcome, measured by changes in CY-BOCS over time ($p=.002$). The association between baseline insomnia and change in OCD symptoms remained significant ($p=.033$) while controlling for GAD-7 and PHQ-9. Conclusion: Insomnia is common among adolescents with OCD, and these data suggest that these patients may be at increased risk for poor treatment outcomes. Future research to explore mechanism and adjunctive treatments is warranted.

Keywords: OCD, insomnia, sleep disturbance, adolescents, concentrated treatment, exposure, B4DT, CBT

2.15: Others

254/T2.15/P/99: Cognitive-Behavioral Therapy for OCRDs: Therapist Challenges in Liberating the client's Self from Mental Constraints

Authors: Ummul Fatima, Yamini Sharma, Dr. Ajay Kumar

Contact: ummulm123@gmail.com

Country: India

Abstract: Body Dysmorphic Disorder (BDD) and Trichotillomania (TTM) fall under the umbrella of Obsessive-Compulsive and Related Disorders (OCRD), a classification characterized by repetitive thoughts and behaviors with shared etiological and diagnostic features (ICD-11; WHO, 2019). The overall lifetime prevalence of OCRD is reported at 9.5% (Murphy et al., 2016). BDD and TTM affect approximately 2.4% and 3.5% of the general population, with onset typically occurring around 18-19. This case series focuses on two patients seen at the outpatient psychiatry department of NIMHANS. Both BDD and TTM exhibit complex pathology, causing distress and impairing psychosocial functioning, often compounded by comorbid conditions such as anxiety or depression. Modified Cognitive-Behavioral Therapy for BDD (CBT-BDD) and Habit Reversal Therapy (HRT) are recognized as the gold standard treatments for these disorders (Wilhelm, 2014 ; O Rahman et al., 2017). The study presents cases of two young female adults pursuing bachelor's degrees, illustrating their struggle with repetitive movements and body-focused coping mechanisms per the body-focused repetitive behavior model. The paper aims to delineate clinical findings, drawing from the social-cultural context where challenges and applications of CBT are yet to be thoroughly evaluated in such presentations. Simultaneously, it explores the therapeutic alliance, acknowledging the challenges posed by the Indian scenario, marked by a blend of collectivism and emergent individualism driven by globalization.

Overall, it will put forth the challenges and therapist perspectives while working on transdiagnostic symptoms presentations while holding the intricacies of its idiosyncratic presentation.

Keywords: Trichotillomania, Body Dysmorphic Disorder, Challenges, Cultural issues.

2.15: Others

260/T2.15/P/102: Practical challenges to exposure and response prevention in OCD – A case report

Authors: Sayan Saha, Nileswar Das, Pratap Sharan

Contact: sayans231@gmail.com

Country: India

Abstract: Aim and Methodology: Cognitive behavioural therapy has extensive evidence for both treatment naïve and treatment-resistant OCD. However, the practical application of CBT, including ERP might present with multiple challenges owing to heterogeneity of symptoms

and temporal variation in the content. Presence of comorbid illness hinders patient adherence. Our case study attempts to address these challenges.

Study design includes single instrumental case study of a 26-year-old unmarried male with multiple medical co-morbidities having premorbid anxious avoidant traits presented with illness of 8 years characterised by obsessive thoughts, images, impulses, and fears; multiple co-occurring compulsions, magical thinking, along with severe anxiety. Data collection was done by in-depth face-to-face interviews, quantitative scales and case notes.

Summary: CBT was initiated with assessment using YBOCS, HAM-A and TAF scale. Relaxation techniques were applied before initiating ERP followed by behavioural analysis and developing hierarchy lists. Multiple sessions of psychoeducation. Cognitive restructuring methods such as responsibility pie chart were employed. Sessions were taken twice weekly with his brother as a co-therapist for three months. Different challenges encountered were difficulty in evoking anxiety, interference by different obsessions, severe anxiety affecting patient compliance, using covert neutralisation techniques and difficulty in monitoring them, multiple failed sessions. The methods employed for tackling them involve taking frequent sessions of psychoeducation and cognitive restructuring in between, tackling multiple obsessions and compulsions in one sitting and using the inhibitory learning approach.

Conclusion: Addressing different challenges encountered during the sessions led to clinically significant improvement in symptoms and functioning while teaching the client multiple strategies for successful relapse prevention.

Keywords: OCD, CBT, ERP, Inhibitory learning approach

2.2: New trends in CBT for Anxiety disorders

262/T2.2/P/103: CBT for Anxiety in the last decade: a systematic review of the major changes and its use in current clinical practice

Author: Navvya Arya

Contact: anavvya@gmail.com

Country: India

Abstract: In clinical practice, Cognitive Behavioral Therapy (CBT) has been around for a long time. Over a period of time, its effectiveness has been monitored and adjusted in response to technological advances and population shifts. Additionally, CBT has demonstrated superior efficacy in treating conditions including depression and anxiety. The causes of these illnesses have evolved and undergone changes along with the world. As a result, the healthcare provider must modify their strategy appropriately. This systematic review critically examines the evolution and contemporary applications of CBT for anxiety in the last decade, shedding light on major changes and updates that have shaped its utilisation in current clinical practice. Anxiety disorders have become increasingly prevalent in modern society, necessitating a closer investigation of how CBT has adapted to meet the evolving needs of individuals facing these challenges. The review systematically analyzes a diverse range of studies, encompassing both empirical research and clinical trials, to demonstrate the transformative shifts in CBT methodologies. It investigates innovations such as technology-assisted interventions, personalised treatment plans, and integrative approaches that have emerged in response to the dynamic landscape of mental health care. A key focus is placed on the integration of last decade

advancements into clinical practice. The review explores how therapists are incorporating evidence-based changes into their treatment modalities, emphasising real-world implications and practical considerations. The discussion looks into the integration of digital platforms, virtual therapy options, and the tailoring of interventions to individual patient needs. This review gives a thorough overview of the significant developments in the last decade cognitive behavioural therapy (CBT) for anxiety by combining findings from several studies. It also offers practical insights for mental health practitioners looking to improve the efficacy of their therapeutic interventions. This review's careful examination of modern techniques makes it a vital resource for researchers, educators, and practitioners navigating the rapidly changing field of anxiety treatment.

Keywords: CBT, Anxiety, Systematic Review, Clinical practice, Effectiveness

2.4: CBT for Women & Reproductive Health

264/T2.4/P/104: Pre-natal Psychological Assessment: A Review (Single Centre Study)

Authors: Zehra Fatima, Dr Anu Tiwari, Dr Rana, Dr Shushma

Contact: zehra.hhs@gmail.com

Country: India

Abstract: Introduction- In India, one out of five women has psycho-social issues after childbirth. Due to a lack of awareness and social services, they are left unattended. Antenatal assessment and intervention can prevent Postnatal distress. Pain, fatigue, childbirth, breastfeeding, and experiencing all at once is distressful. Thus, early infant developmental parenting can be compromised if the maternal well-being is bargained. Therapeutic intervention during antenatal can help minimize the effect of the postnatal emotional burden on a mother.

Method- A total of 153 patients were evaluated for Psychological distress with the help of the ANRQ we screened pregnancy-related anxiety, fear of childbirth, child health, and panic. Quality of life was assessed by QLQ-GRAV.

Conclusion- It was seen that Psychosocial intervention should be considered a mandatory part of the multi-disciplinary approach towards treatment. However, therapeutic intervention is needed for holistic recovery and to meet the unmet demands of her new life.

Keywords: QLQ, Psychosocial intervention, Antenatal

2.2: New trends in CBT for Anxiety disorders

266/T2.2/P/106: Ecological Anxiety

Author: Ana Paula Alves Silva

Contact: arapiraca20@hotmail.com

Country: Brazil

Abstract: What is Ecological Anxiety and how can cognitive therapy help those suffering from this type of anxiety?

The objective of this work is to present ecological anxiety and its causes, which is currently a new phenomenon that is gaining more and more attention in research. This also shows how environmental impacts are activating vulnerability beliefs.

Another objective will be to demonstrate how more conscious and sustainable actions and the practice of mindfulness can minimize concerns related to possible environmental catastrophes. This is a very important topic to be discussed, as there are many people who may be suffering from this type of anxiety, and many are unaware of the subject.

Talking about ecological anxiety is a way of psycho educating society, both to raise awareness about possible public policies that focus on more sustainable actions focusing on reducing pollution on the planet, and to prevent possible psychological disorders in society.

Keywords: Ecological Anxiety

2.15: Others

272/T2.15/P/108: The importance of empathic witnessing

Author: Dr. Shehla Alvi

Contact: shehlalvi@gmail.com

Country: Pakistan

Abstract: I have been working as a body psychotherapist for more than a decade and have seen more than a thousand of clients with trauma and associated issues. However, I like to bring in the 3 case studies and the importance of the empathic witnessing and empathic presence the outstanding transformational it brought in my clients lives. I would like to talk about K who was 7 years (diagnosed behavioral issues), and B who was 10 years old (diagnosed with Autism spectrum disorder), and D 14 years old girl diagnosed as (learning disability and schizophrenia) In my work I would share the qualitative data, of my strategy with them and how they were being brought to me. Their presenting complaints and what started to change after 4 weeks, 6 weeks, 8 weeks, and 10weeks). I would also like to share the difficulties, uncertainties and incredible journey of my clients. I will highlight the parental response and reaction. In my presentation I would be discussing the recommendations to the state and how and what we can do to change to give some consistent therapeutic space to the dependent clients.

Keywords: Body Psychotherapist, Autism Spectrum Disorder, Empathetic Witnessing, Empathic Presence, Learning Disability, Schizophrenia, Behavioural Issues

2.15: Others

274/T2.15/P/109: Cognitive Behavioural Therapy for obsessions consisting of a single word "Happiness": A case study

Authors: Upasna Gopalakrishnan, Shyamsundar Arumugham, Sagar Mukherjee

Contact: upasna1511@live.com

Country: India

Abstract: Background: OCD is a common and debilitating illness affecting 1-2% of the general population. While OCD typically consists of obsessions and compulsions, some

patients with OCD have only obsessions. Popularly termed ‘Pure O’, the existence of purely obsessive OCD has been questioned by several authors, who argue that obsessions are invariably accompanied by compulsions or neutralizing behaviours. We report one such case of ‘Pure O’ where the patient had a single intrusive thought comprising of the word “Happiness”. Introduction to the case The patient was a young male in his mid-twenties. A few months before the presentation, he was contemplating his future and wondered, “Will I be happy or not?”. Since that moment, the word “Happiness” continued to repeat in his mind, gradually increasing to a frequency of 20 times per minute. This led to increasing distress and avoidance of most activities. The patient was unable to concentrate on anything and developed depressive symptoms and suicidal ideation secondary to the intrusive word. Case formulation Contrary to typical obsessive ruminations, the content of the obsessions (“Happiness”) was not distressing to the patient nor did it hold any special significance. Rather it was the frequency that was distressing. The patient would remain preoccupied with it and keep monitoring his thoughts for the word. The patient was also found to have perfectionistic traits, which would make him avoid things if he felt he could not perform his best. It was conceptualised that the patient’s preoccupation with intrusive thought and perfectionism leading to avoidance were maintaining factors. Course of treatment The patient was psycho-educated about the cognitive model of OCD and the “camel effect”. An audio loop was made which consisted of the word “Happiness” being repeated in the patient’s own voice at the rate it usually comes. Listening to the audio loop or imaginal exposure by itself did not cause any distress. A list of tasks was made in order of increasing difficulty. The patient was asked to listen to the audio loop while completing various tasks, such as reading the newspaper. The patient’s cognitions regarding perfectionism were explored and cognitive restructuring was done. Mindfulness-based techniques such as thought detachment were used. Gradually, the patient was able to carry out his work despite the audio loop playing. He was also able to intentionally think the same thought repeatedly without much distress. Conclusions: This case study illustrates the importance of formulation for understanding a less common type of OCD and illustrates a modification of traditional CBT with newer techniques.

Keywords: CBT, OCD

2.1: CBT for Child & Adolescent Issues

276/T/2.1/P/111: Application of Psychological Intervention for Treating Adjustment Disorder and Dissociative Symptoms in Adolescents: A Case Report

Authors: Asma Thabassum K, Dr. Anamika Sahu, Dr. Rajendran

Contact: asmathabassum2021@gmail.com

Country: India

Abstract: Background: Psychological illnesses in adolescents rarely occur in singularity and are often a culmination of multiple life events, relational processes, and psycho-biological stressors. Here, we present a case of adjustment disorder with dissociative symptoms that highlights these interactional outcomes.

Case Summary: The case is of a 14-year-old female adolescent who presented with complaints of low mood, infrequent death wishes, frequent falls with unconsciousness following an alleged incident of abuse by an older peer and bullying, in the background of an uninvolved mother and the early demise of her father. In the context of these, there were also attempts of self-harm

and expressed suicidal ideation on projective assessments. The management involved conceptualizing the case using a trauma-focused lens of CBT plus integration of eclectic principles, focusing on grounding and a safety plan, working on emotional regulation, rewriting the life script, role rehearsals as behavioral strategies and using restructuring as a means to intervene on established thought patterns.

Result and Conclusion: Across 2 instances of IP care and 30 sessions, there was significant improvement in emotional regulation and recognition of self-worth. Individual therapy sessions are still ongoing with consistent maintenance of the regulatory strategies and baseline functioning. Future plan of management would entail consolidation of goals and subsequent termination.

Keywords: Adolescents; Cognitive Behaviour Therapy; Adjustment disorder, Dissociation

2.6: Trends in Early Intervention of Psychosis & Personality Disorders

278/T2.6/P/112: Neuropsychological Insights into Psychosis: Exploring Brain Changes and Predictive Measures

Authors: Gargi Shukla, Purva Sethi, Komal Naruka

Contact: mail2gargi.shukla@gmail.com

Country: India

Abstract: The purpose of this study was to determine the relationship between neuropsychological changes in the brain and psychosis on the basis of already available research data. Eighteen research papers were analyzed thoroughly to answer two research questions (i) What neuropsychological changes occur in the brain due to psychosis? (ii) What changes in the brain can be used to predict psychosis in at-risk patients/individuals? The study explores factors influencing psychosis onset, including genetic predisposition, environmental traumas, and social influences. Utilizing databases such as Google Scholar, JSTOR, and others, the research analyzes 21 articles to synthesize findings and establish relationships. Significant changes in the prefrontal cortex, hippocampus, mesolimbic pathway, and HPA axis due to psychosis are identified. Additionally, EEG recordings and MMN paradigms emerge as potential tools for predicting psychosis based on neuroimaging and cognitive deficits.

Results highlight the impact of psychosis on white matter microstructure, gray and white matter volume reductions, and abnormalities in brain regions associated with memory, executive functions, and emotional processing. Furthermore, the study discusses predictive measures, including the significance of P300 abnormalities and MMN reductions in at-risk populations. In conclusion, this research contributes valuable insights into the nuanced relationship between neuropsychological changes and psychosis, shedding light on potential predictive measures. The findings hold implications for early intervention strategies and the development of targeted treatments for individuals at risk of psychosis.

Keywords: Brain, Neuropsychological changes, Neuropsychological prediction of psychosis, Prediction of Psychosis

2.5: CBT treatment for substance abuse and addictive behaviours

281/T2.5/P/114: Application of CBT-IA in problematic internet usage in adolescence: A case series

Authors: Snehasree Neogy, Dr. Susmita Halder

Contact: snehasree949@gmail.com

Country: India

Abstract: Introduction: The term Internet addiction is a broader term encompassing compulsive-impulsive online/offline computer usage for excessive gaming, sexual preoccupations and social networking. They share the following four components: 1) excessive use, resulting in a loss of sense of time or a neglect of basic drives, 2) withdrawal, feelings arising when the computer is inaccessible, 3) tolerance, surfacing as the need for more hours of use, and 4) negative repercussions, including lying and poor academic achievement. CBT targets these behaviours in three stages. The first is behavior modification, when the individual begins to develop the ability to control when they are online and offline. The goal of the second stage is cognitive reconstruction where cognitive conditioning motivates the individual to initiate Internet use and identify and reverse the triggers for overuse. The third stage focuses on the patient's functional problems associated with their Internet use. Internet addiction has been on the rise with the global digitalization and post-pandemic situations and can lead to significant dysfunction.

Objective: To treat symptoms of Internet addiction using Cognitive Behaviour Therapy based intervention in light of the CBT-IA model.

Case Operation Procedure: CBT intervention for internet addiction was performed on three adolescents (2 males, and 1 female). The baseline assessments were conducted. Sessions ranged from 8-10 which targeted the goals through behavior modification, cognitive restructuring and harm reduction. The short-term goals of the current intervention were to help the child schedule online and offline activities, improve their ability to control their internet usage, and better their ability to function in offline socialization followed by regulation of emotions and impulse control related to Internet use. The long-term goals focused on enhancing coping skills to prevent future relapse and maintain recovery.

Discussion: Significant reduction was seen in the duration of use, urge/craving, behavioral issues when unable to use the net (withdrawal) and overall attention span. Overall, improvement in motivation to reduce excessive use of the internet was seen. Children reported improved awareness of the catalysts that led to compulsive internet usage and skills to cope with and manage urges. Alternate activity involvement increased. Post-intervention assessments were conducted and follow-ups were continued.

Conclusion: The findings show that CBT interventions for Internet addiction in children is effective. Adequately powered studies with a larger sample size are needed for further substantiation.

Keywords: Problematic internet usage, children, CBT-IA

VIRTUAL PRESENTATIONS

2.1: CBT for Child & Adolescent Issues

289/T2.1/VP/1: Using Drawings in Cognitive-Behavioral Therapy (CBT) for Depression and Suicidality in Early Adolescents: A Case Report

Authors: Kusuma Minayati

Contact: dr.kusumaminayati@gmail.com

Country: Indonesia

Abstract: CBT has become an established treatment for depression in adolescents. Various stressors, including interpersonal conflicts, may trigger depressive episodes and suicidal crises in predisposed adolescents. Apart from cognitive distortions regarding stress severity, predisposed youth may struggle with recognizing, generating, and implementing solutions. Suicidal adolescents often encounter challenges in devising effective alternatives compared to their non-suicidal counterparts. Recognizing the need for individualized approaches, this study explored the feasibility of integrating drawings into a CBT designed for a 12-year-old female patient exhibiting depressive symptoms for the past five months, exacerbated by suicidality in the last two months. Despite prior consultations with other psychiatrists and receiving antidepressants, antipsychotics, and anxiolytics, significant progress was lacking, highlighting the importance of adding psychotherapy to the management plan. The 30-minute biweekly therapy sessions involved cognitive reconstruction and behavioral modification. Sessions commenced with introducing the concept of the thought-feelings-behavior relationship and recognizing the patient's internal world through self-created drawings. Pre- and post-intervention assessments, incorporating psychopharmacology and psychotherapy, revealed a significant reduction in Child Depression Inventory (CDI) after three months, and patient resumed regular school attendance. At the six-month evaluation, suicidal thought persisted, albeit less frequently, with the absence of other depressive symptoms hindering daily activities. The continued use of drawings aided the patient in self-recognition and served as a therapeutic 'journal' facilitating discussions with the therapist, particularly in stress regulation. In conclusion, while full remission in suicidality was not achieved, these findings suggest that CBT, incorporating personal elements such as drawing, is a feasible nonpharmacological option for early adolescents. Tailored programs necessitate regular follow-up sessions to assess needs and enhance the patient's quality of life.

Keywords: Early Adolescent, Cognitive Behavioral Therapy, Drawing Therapy, Depression, Suicidality

2.3: Advances in treatment of mood disorders and suicidal behavior

293/T2.3/VP/4: Association of Behavioral Activation Therapy and Salivary Cortisol

Authors: Ritsu Ishikawa, Hironori Shimada

Contact: ritsuiskw@ruri.waseda.jp

Country: Japan

Abstract: Introduction: Behavioral activation therapy is effective in reducing depression (Dimijian et al., 2006). However, no consistent findings have been obtained regarding its action mechanism. In response to this problem, previous studies have pointed out the need to examine the action mechanism from a psychophysiological perspective (Janssen et al., 2021). Nonetheless, there are no sufficient investigations from a psychophysiological perspective in behavioral activation therapy. In the action mechanism of behavioral activation therapy, it is assumed that the reward perception is increased by the behavioral activation procedure. A psychophysiological index associated with the reward system is salivary cortisol (Cunningham et al., 2021). In behavioral activation therapy, which manipulates sensitivity to rewards, salivary cortisol levels are expected to change in accordance with changes in the reward system. Nevertheless, the relationship between the action mechanism of behavioral activation therapy and salivary cortisol remains unexplored. Therefore, this study aimed to examine the relationship between salivary cortisol and behavioral activation therapy.

Methods: A total of 30 university students (mean age 23.6 ± 3.1 years) participated in the study. The following factors were measured: (a) EROS Japanese version (Kunisato et al., 2011), (b) CES-D (Shima et al., 1985), (c) salivary cortisol (Izawa et al., 2010), area under the curve with (AUCG). Procedure: Saliva samples were collected four times on two consecutive days: immediately after waking, 30 min after waking, before lunch, and before bedtime. A questionnaire was administered to the participants at one of the time points during the two days. This study was approved by the Waseda University Ethics Committee on Research with Human Participants (consent number: 2023-055).

Results and Discussion: Hierarchical multiple regression analysis was conducted with perceived reward and AUCG as independent variables and depression as the dependent variable to examine the influence of perceived reward and salivary cortisol on depression. In the first step, perceived EROS and AUCG were entered as explanatory variables. Results showed that perceived EROS was a significant negative predictor of depression ($b = -1.41$, $t(19) = -10.43$, $p < .001$; $F(2,19) = 54.41$, $p < .001$, $R^2 = .85$). In contrast, AUCG did not predict depression ($b = -.26$, $t(19) = -.37$, $p = .718$). The second step entered the interaction term between EROS perception and AUCG as an explanatory variable. The results showed that the coefficient of the interaction term was not significant, and the change in R^2 was .003 ($F(1,18) = 35.10$, $p < .001$). Thus, the results suggest that salivary cortisol does not affect the degree of depression. These findings suggest that salivary cortisol does not modulate the relationship between reward perception and depression. Further investigation of the action mechanism in behavioral activation therapy using psychophysiological variables other than salivary cortisol may help elucidate its action mechanism further.

Keywords: depression, Behavioral Activation Therapy, reward, salivary cortisol

2.13: CBT for caregivers of patients of chronic and terminal health conditions

302/T2.13/VP/7: An Attempt to Understand Reactionary Behavioral Science to Dementia Symptoms Using Textual Data in Family Caregivers

Authors: Takanori Fukudome, Hironori Shimada

Contact: fukudometakanori@toki.waseda.jp

Country: Japan

Abstract: Problem: As the number of dementia patients in Japan is estimated to increase, the number of family caregivers is also increasing (Ministry of Health, Labour and Welfare, 2019). While cognitive behavioral therapy (CBT) has been shown to be effective in supporting family caregivers overseas (Cheng et al.), in order to establish family caregiver support in Japan, it is necessary to organize the picture of caregivers' conditions from the framework of CBT. It has been noted that family caregiver-caregiver interactions are inhibited by dementia symptoms (Nagata et al., 2022), and CBT programs have been shown to improve not only caregivers'; mental health but also indirectly behavioral and psychological symptoms of dementia patients (Cheng et al., 2022) Brodaty & Arasaratham, 2012). However, few studies in Japan have focused on caregiver-caregiver interactions. In this study, we attempted to describe the reaction process to dementia symptoms from caregiver text data and organize it within the framework of CBT.

Methods: A modified grounded theory approach (M-GTA) was used with some of the text data from the data bank. The theme of the analysis was "Reaction process of family caregivers to dementia-certified symptoms and its influencing factors" and the focus of the analysis was "family caregivers caring for dementia patients". This study was conducted with the approval of the 'Ethics Review Committee for Research Involving Human Subjects.' The study was conducted with the approval of the 'Ethics Review Committee for Research Involving Human Subjects' (Approval No.: 2023-400).

Results and Discussion: The analysis generated 17 concepts, 5 subcategories, and 2 categories. The categories of pre- and post-diagnostic reactions were partially supported by the results of Rohki et al. (2021), which moved from a CBT framework to an organized mid- dementia reaction category. As a result, the subcategory of 'functional interactions' in mid- dementia was organized from the CBT framework. For example, one of the concepts of "functional interaction" "retrospective thinking and responding to symptoms" was a state of seeking accompanying behaviors that would not lead to problematic behavior. Thus, it became clear that the healthy psychological state of caregivers may be related not only to medical knowledge, but also to caregivers' understanding of symptoms based on contingent situations.

Keywords: Dementia, family caregivers, M-GTA

2.15: Others

303/T2.15/VP/8: Applying Mindfulness-Based Cognitive Therapy for Treating Sexual Themes in Obsessive Compulsive Disorder and Anxious Avoidant Personality Disorder: A Case Report

Authors: Hitankshi M. Trivedi, Dr. Nitin Anand

Contact: hitankshi.trivedi@gmail.com

Country: India

Abstract: Background: Exposure and Response Prevention (ERP) is widely used for treating patients diagnosed with obsessive-compulsive disorder (OCD). However, applying ERP becomes challenging when patients present with predominantly mental obsessions and compulsions. We suggest that Mindfulness-Based Cognitive Therapy (MBCT) is highly effective in such cases, with therapy focusing on modifying the patient's relationship with their thoughts, instead of changing the nature of thoughts themselves.

Case Summary: MBCT was applied in therapy with a 26 year old female patient presenting with sexual obsessions and mental compulsions. She presented with intrusive thoughts such as “looking anywhere else apart from the person’s eyes will indicate that I am distracted”, and “looking at a person’s body parts will stimulate inappropriate sexual desire in the other person”. She was diagnosed with Obsessive Compulsive Disorder (mixed type) and Anxious- Avoidant Personality Disorder (AAPD). Management included obtaining a detailed case history (which revealed multiple histories of sexual abuse and high standards of self-oriented perfectionism); administration of psychological assessments; and conceptualizing the case using a Trauma-focused CBT formulation. Eclectic principles were integrated in therapy, with a focus on cognitive restructuring (related to both OC symptoms and AAPD), behavioural experiments, arousal-reduction techniques such as deep breathing, practicing mindfulness, reducing self-criticality, and developing a coherent sense of self.

Results and Conclusion: There was significant improvement noted across 35 sessions, characterized by a reduction in sexual obsessions and mental compulsions, decrease in cognitive irrational errors, reduction in avoidance behaviour, decrease in self-oriented perfectionism, reduced self-criticality, enhancement of self-efficacy beliefs, enhanced sense of ‘self’, improvement in insight, and overall improvement in socio-adaptive functioning. Further plan of management would include addressing traumatic experiences using trauma-focused interventions and subsequent termination.

Keywords: Obsessive-Compulsive Disorder, Mindfulness-Based



ACBTA 2024 NEW DELHI SCIENTIFIC PROGRAM

TRACK 3

CULTURAL ADAPTATION OF CBT AND CURRENT TRENDS

(1 MARCH 2024: DAY 3)



TRACK 3

CULTURAL ADAPTATION OF CBT AND CURRENT TRENDS (1ST MARCH 2024: DAY 3)

OPEN SYMPOSIA

3.1: Current trends & challenges in high-tech, digital & AI based CBT interventions
237/T3.1/S/12: Cognitive Neurophysiology Assessments and Advanced Computing to Inform Practice of Cognitive Behavior Therapy

Authors: Prof. (Dr.) Kanwal Preet Kochhar
Contact: kpkochhar6@gmail.com
Country: India

The healthcare sector is in the midst of a transformation. Evidence based Mental Health care, Digital technology and Artificial Intelligence (AI) are essential enablers for a patient-centric health system. Artificial Intelligence (AI) Technology offers the immense possibilities to transform. India's Healthcare systems address its major concerns, primarily: Cost, Quality and Accessibility. Behavioral intervention technologies (BITs) such as AI-Therapy's Overcome Social Anxiety may offer a potential solution to resolve barriers to access and expand mental health care. Today with the rising prevalence of the neurodevelopmental, neurodegenerative and stress anxiety-based disorders there is an emerging need to assess and elicit their psycho physiological correlates. Assessment of Motor Cognition by Bereitschafts' potentials and can tell us of factors influencing motor planning and execution. TMS is a non-invasive method for neural tissue modulation and assessing cortical excitability, cortico- spinal integrity in patients with Psychiatric and Neurological disorders. Functional near- infrared spectroscopy (fNIRS) is a tool to supplement the cognitive and affective assessment, social functioning, psychotherapy and rehabilitation. Visual Tracking of movements of pupil and the attentional bias to standardized images help in assessing effects of cognitive behaviour therapy (CBT). Software based wireless recording and analysis of physiologic variables like ECG, EEG, ENG, Respiratory rate, skin temperature, electrodermal activity, photo plethysmography can help us to develop personalized mental health care. Advanced computing techniques, can analyze large datasets of patient information to understand users' sentiments, detect signs of distress and provide timely care. Natural Language Processing (NLP). Virtual Reality (VR) and Augmented Reality (AR) offer immersive environments, simulate real-life scenarios, providing controlled and safe environments for therapy sessions, secure video conferencing, real-time data sharing, and remote monitoring of patients facilitates telepsychiatry and teletherapy services. Developing mobile applications and wearable devices to monitor individuals' mental health metrics, such as heart rate variability, sleep patterns, and activity levels can provide continuous data for diagnosis and prognosis. Creation of personalized treatment plans of therapy to tailor interventions. Overall, competencies in advanced computing empower mental health professionals to leverage technology effectively, enhance the quality of care, reach broader populations.

3.4: Advances in Culturally Adapted models of CBT

71/T3.4/S/8: Designing and evaluating cognitive behavioral interventions for non-specialist delivery in India

Authors: Kanika Malik, Urvita Bhatia, Miriam Sequeira, Bindiya Chodankar

Contact: kmalik1@jgu.edu.in

Country: India

Abstract: Background: Non-specialist providers are fundamental to scaling up cognitive and behavioral interventions in low-resource settings globally. The symposium will focus on innovative examples of cognitive and behavioral interventions designed for delivery by non-specialists and optimized for Indian context.

Description: The symposium will discuss the developmental methods, intervention designs and outcomes for three distinct CBT programmes intended for varied youth and adult populations in community settings across India.

Individual topic description:

Presentation 1 - Brief problem solving intervention for youth depression: A non-specialist delivered, brief problem-solving intervention for common youth mental problems was developed through scoping literature reviews, formative qualitative studies, and extensive piloting. The resulting intervention was evaluated in a 2-arm randomized control trial (RCT) in New Delhi with 250 school-going adolescents presenting with elevated mental symptoms and distress or functional impairment. Participants were randomly allocated to either receive problem-solving through non-specialist guidance supported with printed materials (intervention group), or access to problem-solving via printed material only (control group). Outcome assessments at 6 weeks, 12 weeks, and 12 months indicated a small to moderate effect in favor of the intervention. Future plans include a 3-arm RCT, scrutinizing intervention mechanisms among university students.

Presentation 2 - Peer counselling for maternal depression: This presentation describes the adaptation of the Thinking Healthy Programme (THP) for delivery by local women (peers) in community settings in Pakistan and India, and the evaluation of its impact on perinatal depression. The THP was adapted through focus groups and interviews with relevant stakeholders was found to be contextually suitable and easy to learn alike by mothers and peers. The adapted THP plus was evaluated using an RCT with pregnant women attending antenatal clinics, aged 18 years and above, meeting threshold for depression. Participants were randomly allocated (1:1) to enhanced usual care (EUC) alone (control group) or THP plus enhanced usual care (EUC) (intervention group). THP plus had a moderate effect on symptom severity and remission from perinatal depression over the 6 month post-natal period.

Presentation 3 - Addressing harmful drinking among men: Developed through a systematic approach, Counselling for Alcohol Problems (CAP) integrated strategies from motivational enhancement, cognitive and behavioural interventions to address harmful drinking through brief sessions. The effectiveness and cost-effectiveness of CAP were assessed via an RCT in Goa. Participants were male patients, aged 18-65 years, attending primary health centers and found to be drinking at harmful levels. They were randomly allocated (1:1) to EUC alone (control group) or EUC combined with CAP (intervention group). Findings indicated significant improvements in several outcome measures for the intervention group and showcasing potential cost-effectiveness.

Presentation 4 -Reflections from a Non-Specialist Counsellor: A non-specialist counsellor elucidates their experiences, learnings, and challenges encountered during training, supervision, and delivery of an intervention package in low-resource communities, providing a ground-level perspective on the practicalities and realities of implementing mental health interventions in community settings.

Keywords: community mental health, India CBT, non-specialist provider, adapting CBT

3.3: CBT Interventions in Work Settings

82/T3.3/S/11: CBT interventions in Work Settings

Authors: Chinu Agrawal, Nithya Sriram, Sai Sudha Saini

Contact: feelingmindsindia@gmail.com

Country: India

Abstract: Cognitive Behavioural Therapy is a systematic and structured approach that targets the underlying cognitive patterns and behaviors that lead to stressors in order to assist people in managing their stress. CBT therapies have been shown to considerably reduce workplace stress and promote a healthier, more productive work environment by providing employees with appropriate coping techniques while promoting an optimistic attitude. CBT assists employees in recognising and challenging harmful thought patterns about their jobs, coworkers, and working environment. Employees are encouraged to address workplace issues with resilience, by replacing unrealistic reservations and anxieties with realistic and positive perspectives. Additionally, CBT gives employees useful coping mechanisms to handle stress in the moment, such as mindfulness and relaxation exercises, fostering emotional health and harmony at work. In essence, cognitive behavioral therapy (CBT) acts as a catalyst for employee empowerment, enabling individuals to develop a positive outlook, manage work-related stress, and build healthy relationships that ultimately contribute to increased job satisfaction and productivity.

The primary focus of CBT lies in identifying and modifying maladaptive thoughts and behaviors that contribute to stress, anxiety, and burnout, all of which significantly affect work-life balance. Through its structured and goal-oriented approach, CBT equips individuals with coping mechanisms and stress management techniques that can be applied in both professional and personal domains. By emphasizing the interplay between thoughts, emotions, and behaviors, CBT empowers individuals to reframe negative perceptions of work and foster a more adaptive and resilient mindset. This cognitive restructuring facilitates a shift towards prioritizing personal well-being alongside professional responsibilities.

Work stress could be related to the targets, job performance, work life balance, interpersonal relationship issues & working environment. This can lead to physical illness, as well as psychological distress and mental illness. However, sometimes with same work environment in a same organization, having same skill set in similar demographics, the employee's performance varies due to the Cognitive distortions. Many individuals use stress-coping strategies, such as sedentary activities, unhealthy eating behaviours, and smoking & alcohol consumption, which do not contribute to long-term stress management. The conceptualization of work stress is important when developing interventions for the workplace.

The individual or group CBT interventions can be studied and a simple model can be worked upon for enhancing work performance-related factors and mental health for non-clinical working population. In addition to the interventions, the model needs to be integrated with the psycho-education and the training of the managers and leaders to help implement the sustainable model for effectiveness.

Keywords: CBT intervention, work-life balance, stress, sales, relationships

3.8: CBT interventions for special and marginalized populations

133/T3.8/S/16: Out of The Closet: A Trauma Lens On Queer Affirmative Therapy Practices

Authors: Gayathri S, Sunita Purty, Andree, Sheeba Shamsudeen, Ritwika Nag

Contact: g3vnarayan@gmail.com

Country: India

Abstract: Background: Queer population generally experience higher levels of psychological distress and psychological trauma, leading to poorer mental health than cis-gender counterparts. In recent years, although research into support mechanisms for managing distress experienced by queer communities has increased, stigma-related discrimination related to sexual minority status remains. This is further compounded by stigma against mental illnesses thus creating double jeopardy. Alongside mental health problems, presence of co-morbidities aggravates minority stress and psychological trauma.

Description: Queer individuals have specific mental health needs, and the current mental health training and practice are often inadequate to handle these needs. Minority stress model and trauma intervention model can be used to aid understanding into possible treatment ideas across a range of therapies like Cognitive Behaviour Therapy, Interpersonal Therapy and Acceptance and Commitment therapy.

We aim to introduce the need of the hour in queer mental health practices by discussing existing multifaceted psychosocial challenges and illustrating execution of queer affirmative therapy practices. Furthermore, trauma symptomatology of queer population is discussed along with clinical case presentations. Recent development in evidence-based treatment modalities like queer affirmative CBT, ACT and Narrative therapy practices will also be explored in trauma-focused context.

Speaker 1 Challenges of Mental Health Care for Queer Population: Psychosocial aspects of challenges in mental health care of queer population will be discussed along with specific mental health needs for queer community such as when coming out to the family and community while preparing for gender affirmative care.

Speaker 2 Queer Affirmative Therapy Practices- Process and Perspectives: The queer affirmative approach has shown effectiveness in dealing with the mental health needs of queer individuals. In this viewpoint, we will discuss about the basic concept of the queer affirmative approach, its differences with the usual mental health care, and the process involved in becoming a queer affirmative mental health professional to help Mentalhealth practitioners to expand their knowledge and provide inclusive care for queer people.

Speaker 3 Trauma symptomatology in queer population –conceptualization of psychopathology with clinical case presentations: Importance of embracing trauma informative approach will be discussed by focusing on customised crisis intervention plans and trauma

intervention process. Queer affirmative case conceptualization will be demonstrated by examination of different clinical cases

Speaker 4 New courses of treatment modalities in trauma intervention: Research evidences of different treatment modalities shows promising empirical evidences in resolving psychological distress and trauma by adapting queer affirmative approaches such as queer affirmative CBT, ACT and Narrative therapy practices will be explored in this context.

Keywords: Queer affirmative therapy, trauma focused therapy, queer, LGBT, CBT

3.5: Efficacy of third wave CBT Approaches & way forward

137/T3.5/S/17: Scheme of Schemas

Authors: Debaleena Ghosh, Anindita Ghosh, Aditi Usha Tigga, Aditi Dubey

Contact: ghosh.debaleena03@gmail.com

Country: India

Abstract: Schema, as a fundamental of the cognitive framework, helps individuals to organize and interpret information from the world around them. From processing vast amounts of information efficiently, with basics shaped through personal experiences, cultural influences, and beyond, the schemata stand as a multidimensional construct. The present discussion elaborates the role of these mental scaffolds which after formation might exert strong effects on interpretation of new stimuli and in turn might lead to distortions and errors. These Early Maladaptive Schemas will further be elucidated by eclectic formulations assuming positions of various case presentations, as being self-defeating arrays of emotional and cognitive manifestations, extending their developmental roots to being subsequently reinforced and strengthened throughout life. The primary emphasis of schema focused intervention along with demonstration of relevant and evident techniques will follow with elaboration of their ideologies to integrate and develop newer patterns following the elements of cognitive, behavioural, psychodynamic, and gestalt models of psychotherapy. Schema focused therapy in terms of technical and strategic variant of CBT shall be further compared and contrasted to other evidenced based approaches to generate action-guiding, diagnostic, and therapeutic concepts making it more apt as an intervention for Indian child and adolescent population with special focus to their complex trajectory of unique childhood experiences, cultural deprivation and trauma.

Keywords: Schema, Psychotherapy, Third wave, CBT, Mental illness, Childhood

3.12: Others

159/T3.12/S/20: First 25 years of Academic Clinical Psychology Research at the University of Dhaka

Authors: Hazera Khatun, Mahmudur Rahman, Sabiha Jahan, Ruma Khondaker, Tamima Tanjin, Mohammad Mizanur Rahmank

Contact: hazera.cpsy@yahoo.co

Country: Bangladesh

Abstract: Clinical psychology is the first and comparatively new applied branch of psychology in Bangladesh. Psychology as a subject started its journey in 1956 at the University of Rajshahi as a separate department. At Dhaka University, the psychology department started its journey in 1966. As an academic department, post graduate students usually do research in the field of psychology. Following national need and western trends clinical psychology stepped into the field in 1996 as an applied subject and as a postgraduate department. The aim of this paper is to identify and describe the unique and common trend of research, which was conducted by M. Phil and PhD researcher through secondary data analysis and some cohort representative key informant interview (KII). In addition, the self- reflection of the researchers will be collected to know the implication of the new knowledge and findings, which came from the individualistic research. The study includes 69 M. Phil and 4 PhD research abstract from 1995 to 2023. All abstracts are divided into five-time slots to identify the research area, key terms according to the timeline, adopted methodology, measures and tools used and frequency of topic addressing national and community needs.

Keywords: Clinical psychology department, University of Dhaka, research trends, addressing national and community needs

3.4: Advances in Culturally Adapted models of CBT

185/T3.4/S/21: Implementation and scaling-up lessons from Khushee Mamta, Sri Ganganagar, Rajasthan — a locally adapted version of the Thinking Healthy Programme

Authors: Abhijit Nadkarni, Soumya Singh, Jeslin Emmanuel, Nisha Khichi, Poonam Dhilo, Ravindra Agrawal, Aneel Brar, Josephine Etowa, Shahirose Premji, Aliyah Dosani

Contact: abhijit.nadkarni@lshtm.ac.uk

Country: India

Abstract: Background: The Thinking Healthy Programme (THP), a cognitive behavioural therapy-based, task-shared intervention for perinatal depression, has a strong evidence base supporting its effectiveness in improving outcomes for mothers in South Asia and other low- and middle-income countries. This symposium will focus on implementation and scale-up lessons from the Khushee Mamta (“Happy Motherhood”) Programme, an adapted, community-based version of THP in a “real world” setting in rural Sri Ganganagar, Rajasthan, India. The symposium presenters are part of two research projects funded by the Canadian Institutes of Health Research (CIHR) and the Canadian Social Science and Humanities Research Council (SSHRC) led by Principal Investigator Aliyah Dosani, Mount Royal University, Canada and implemented at the Mata Jai Kaur Maternal and Child Health Centre, Rajasthan.

Description: The overall objective of the CIHR and SSHRC projects is to inform the THP evidence base using community-based participatory and innovative qualitative methods that prioritize the experience of non-specialist counsellors and vulnerable women from the community.

Presentation 1: Using photovoice to examine the lived experience of perinatal women: This presentation focuses on the findings from a project using photovoice and focus groups discussions to explore the lived experience of depression and everyday life among perinatal women in rural Sri Ganganagar. Camera phones were provided to two groups of women, one

screened for depression using PHQ-9 (n = 10) and one group without depression (n = 10), who documented their lives through photos. Focus group discussions (FGDs) were convened with each group centered around the photos. FGDs were thematically analyzed to understand the sociocultural factors that influence perinatal mental health access, uptake, and impact.

Presentation 2: Capturing lay counsellor experiences to inform scaling-up of the Khushee Mamta program: This presentation focuses on the experiences of non-specialist counsellors becoming professionalized caregivers, trainers, and supervisors during the first scaling-up phase of the KM programme. Using interpretive phenomenological interviewing and ethnographic methods, we present findings on the counsellors' experiences developing relationships with key stakeholders, of personal transformation during, and discuss these subjective experiences help decolonize the evidence base in global mental health (GMH) and inform the process of scaling up. While most intervention research focuses on changes among patients, we emphasize the transformation and potential for empowerment among counsellors involved in GMH interventions.

Presentation 3: Direct experiences of Khushee Mamta counsellors: In keeping with the emphasis of prioritizing local experience, two non-specialist counsellors discuss their experiences and challenges implementing the KM program, including expected and unexpected challenges, triumphs, ethical dilemmas, and personal transformations. In addition to counselling, they also discuss their experiences as research partners.

Presentation 4: Training counsellors and digitizing the Thinking Healthy Programme for use in local contexts: This presentation focuses on efforts to digitize the THP and the presenter's own experience training and deploying cadres of lay counsellors across several districts in India. The discussion will focus on how to create a generalizable tool that can be used in specific contexts given India's varied social and cultural context.

Keywords: perinatal mental health, adaptation, qualitative methods, decolonizing global mental health

3.4: Advances in Culturally Adapted models of CBT

247/T3.4/S/28: Moving towards an Indigenous CBT- Integrating Technology and Indian Thoughts for Community based CBT in India

Authors: Vibha Sharma; Shahzadi Malhotra; Manisha Jha

Contact: drvibhas4@gmail.com

Country: India

Abstract: In recent years globalization has helped the process of interaction and integration associated with social and cultural aspects and exchange of ideas, beliefs, and culture across the lifespan. Still, communities in the Indian subcontinent having great diversity in beliefs, practices, and history, experience barriers to psychological/behavioural health care access and inclusion that are in affirmation of an individual's identity, values, and lived experiences. In India, access to particular specialty care like that of clinical psychology, is often quite skewed and limited to urban communities. Drawing attention towards culturally appropriate and adapted methods of popular psychological interventions like CBT, would promote increased therapeutic engagement and optimal outcomes at large community levels. At the same time use

of newer technologies and methods of delivery would further enhance the engagement, retention, and outcomes at larger community levels across the age groups.

The first Presenter will talk about increasingly popular Digital therapeutics in mental health and how Artificial Intelligence can be used to make Cognitive Behavioral Therapy (CBT) more effective and personalized as well as accessible.

The second presentation will discuss the scope of contextually, culturally, and linguistically tailored Cognitive Behavioral intervention protocol and key lessons learned in service delivery based on our experience with the Crisis Support and Counselling Centre (CSCC) of a tertiary care neuropsychiatry hospital, coordinated by the Department of Clinical Psychology at IHBAS.

In the last presentation the introduction and implementation of indigenous CBT techniques using principles of cultural humility, language equality, belief and community-based research will be discussed.

Keywords: Indigenous CBT; Technology; Artificial Intelligence; Crisis Support; Spiritually augmented CBT

ORAL PRESENTATIONS

3.7: Role of CBT in stress management, lifestyle medicine & promoting wellness

1/T3.7/OP/1: Effectiveness of Cognitive Behavioral Therapy (CBT) in Reducing Anxiety Levels among College Students

Authors: Venkateswar Pujari

Contact: venkateswar.pujari@gmail.com

Country: India

Abstract: Aim and Methodology: The aim of this study is to investigate the effectiveness of Cognitive Behavioral Therapy (CBT) in reducing anxiety levels among college students. Participants: The study will enroll 100 college students (50 men and 50 women) ages 18–25. Random Assignment: CBT intervention and control groups will be randomized randomly. The intervention group will get 10 weekly CBT sessions from certified therapists. The sessions will address negative thought patterns and anxiety-management skills. Control Group: The control group will receive no research interventions. Measurement: The Beck Anxiety Inventory (BAI) will be used to measure anxiety levels at baseline, post-intervention, and three months later. Data analysis: T-tests, ANOVA, and descriptive statistics will be employed.

Summary of Results: The control group had a mean baseline anxiety level of 31.8 (SD = 4.2), while the CBT intervention group had 32.4 (SD = 4.6). After the 10-week CBT intervention, the intervention group's post-test mean anxiety score dropped to 18.2 (SD = 3.5), while the control group's score remained unchanged at 31.5 (SD = 4.1). At three months, the CBT intervention group had a mean score of 17.8 (SD = 3.3) and the control group had 32.1 (SD = 4.0). The statistical analysis showed a significant difference in anxiety levels between the CBT intervention group and the control group at post-test and three-month follow-up ($p < 0.001$). College students' anxiety levels decreased significantly after CBT session (Cohen's $d = 1.2$).

Conclusions: Cognitive Behavioral Therapy (CBT) reduces college students' anxiety, according to this study. Compared to the control group, CBT improved anxiety symptoms significantly and sustainably. These findings suggest that CBT may be an effective treatment for college students with anxiety.

Keywords: Cognitive Behavioural Therapies (CBT), Psychological Traumatic Life Events, Mental Disorders, Cultural Adaptation, Practice Standards

3.5: Efficacy of third wave CBT approaches & way forward

13/T3.5/OP/3: Efficacy of Brief Integrated Schema and Mindfulness-Based Intervention on Social Cognition in Adolescents with Internalizing Behavioural Problems- A Pilot Study

Authors: Debaleena Ghosh, Basudeb Das, Madhumita Bhattacharyya

Contact: ghosh.debaleena03@gmail.com

Country: India

Abstract: Adolescence is a period of all-round transition from childhood to adulthood. Internalizing behaviours emerge in adolescence and it is important to consider the role of social cognition in this respect. Socio-cognitive deficits are rooted in self-defeating emotional and

cognitive patterns in childhood known as Early maladaptive schemas. Schema therapy is a novel approach incorporating several theories and techniques. Also, use of mindfulness helps in reducing internalizing problems and enhancing social cognition. Individually, both therapies have found wide acceptance. However, using an integrative approach of schema and mindfulness-based therapy is still an underexplored area of research and can prove to be a comprehensive way of addressing the problems in a holistic yet flexible manner. The present study aims to investigate the effect of Brief Integrated Schema and Mindfulness-based Intervention on Social Cognition in adolescents with Internalizing behavioural problems. This pilot study was conducted using a pre-post paradigm. The sample included adolescents aged 12 to less than 18 years with internalizing behavioural problems, out of which 5 participants received 12 sessions of Brief Integrated Schema and Mindfulness-based Intervention, and 5 were kept in the treatment as usual group. Data analysis was performed in SPSS version 25.0. Results indicated reduction in overall severity of the internalizing symptoms as well as scores on domains of social cognition in the experimental group in the post assessment phase. The Schema and Mindfulness intervention could effectively decrease the internalizing behaviours along with enhancing different aspects of social cognition. Thus, an integrated approach can be incorporated into the interventions designed for adolescents with internalizing behavioural problems. Our findings could lay the groundwork for further investigation in this regard.

Keywords: Internalizing behaviours, Adolescents, Schema, Mindfulness, Social Cognition

3.5: Efficacy of third wave CBT approaches & way forward

38/T3.6/OP/15: Affective Neuroscience Personality Traits and Schema Modes in Borderline Personality Disorder: Implications for Therapy

Authors: Rhea Dhir, Shweta Singh, Amit Arya

Contact: <mailto:rheadhir1998@gmail.com>

Country: India

Abstract: Aim: The aim of the study was to assess the interrelationships between schema modes and the affective neural traits as conceptualized by Jaak Panksepp in individuals with Borderline PD and to further the achievements of psychology and neuroscience in the design of new therapeutic techniques. Materials and Methods: The Brief Affective Neuroscience Personality Scales and Young Schema Mode Questionnaire were used. Ninety-Seven (97) individuals aged 18-59, including 50 patients with Borderline PD and 47 healthy controls were qualified to participate in the study. Results: There was a significant difference between Borderline PD patients and healthy controls on Schema Modes and Affective Neuroscience Personality Traits (ANGER, CARE, SEEK, SADNESS, FEAR). There is a significant moderate positive correlation between Schema Modes (Vulnerable Child, Impulsive Child, Enraged Child, Undisciplined child, detached protector and punitive parent) with Borderline PD Criteria and Dimension Score. A significant moderate positive correlation was also seen between schema modes and Affective Neuroscience personality traits. Logistic Regression analysis results indicate that for Borderline Personality Disorder diagnosis, Schema Mode of Detached Protector Schema Mode, affective neuroscience personality traits of ANGER and FEAR are significant predictors. Conclusions: 1. The detached protector schema mode is significant for Borderline PD 2. Impairment of neural emotional ANGER and FEAR system

significantly explains the variability in Borderline PD 3. Focus on primary emotional traits and schema modes to further aid in therapy.

Keywords: Schema modes; Affective Neuroscience Personality Scales, Primary Emotional Traits; Borderline Personality Disorder

3.12: Others

59/T3.12/OP/25: Effects of Communication Savoring on State Optimism and Affective Well-being

Authors: Alima Akter Methila, Sumiya Pervin, Dr. Akib Ul Huque

Contact: alimaakter-2017514550@psy.du.ac.bd

Country: Bangladesh

Abstract: Research suggests that savoring—mindful attention to, appreciation of, and enhancement of positive experiences—can elevate psychological well-being. However, there is limited inquiry into a specialized form of savoring known as "communication savoring," or the act of deriving pleasure from mindful engagement in communicative moments. This study conducted two experiments to examine whether engaging in past, present, and future forms of communication savoring improve state affective well-being and optimism. In Experiment 1, 180 participants were randomly assigned to one of three groups: past communication savoring, future communication savoring, or a control group. Measures of state positive affect, state negative affect, and state optimism were taken pre- and post-intervention. Participants in the savoring groups engaged in reflective writing exercises that focused on either past or anticipated pleasant communicative moments. Results demonstrated that the past communication savoring group reported significantly higher state optimism than the control group, but no significant changes in state positive or negative affect occurred. Conversely, the future communication savoring group reported higher state optimism and positive affect than the control group, without a significant change in state negative affect. In Experiment 2, 80 participants—comprising friend groups of four—were selectively chosen. Two members from each friend group were randomly assigned to either a present communication savoring or a control group. Participants underwent the same affective and optimism assessments as in Experiment 1, with the addition of a Ways of Savoring Checklist for manipulation checks. The experimental group engaged in a savoring task involving written and verbal exchanges about each other's positive qualities, utilizing various savoring strategies. The control group discussed an emotionally neutral topic: climate change. The present communication savoring group reported significantly higher state optimism and lower state negative affect compared to the control group, with no notable change in state positive affect.

These findings offer novel insights into the potential role of communication savoring in well-being enhancement and suggest its applicability as a mental health intervention. Given that communication savoring encompasses cognitive and behavioral elements, its integration into cognitive behavioral therapy could provide avenues for improved treatment outcomes.

Keywords: communication savoring, state optimism, state affective well-being, mental health intervention, cognitive behavioral therapy

3.1: Current trends & challenges in high-tech, digital & AI based CBT interventions

62/T3.1/OP/27: Serious Games: The First Interactive Computerized Cognitive Behavioral Therapy Product for Depression in China

Authors: Sijia Chang, Jie Yang

Contact: sijiachang@126.com

Country: China

Abstract: Depression has become a significant issue in China after the COVID-19 epidemic, resulting in a timely and effective call for treatment of depression. Computerized Cognitive Behavioral Therapy (CCBT) is expected to be an augmentative and efficient treatment both from medical and economic perspectives compared with therapies utilized in the traditional healthcare system. Previous meta-analyses of CCBT indicated that its effectiveness, and its widespread adoption may promote an improvement in public welfare. However, in China, knowledge about depression regarding the development and effectiveness of psychological interventions is insufficient, let alone awareness related to computerized cognitive behavioral therapy.

Meanwhile, market research reports reveal an absence of CCBT products for patients with depression in China and a lack of empirical evidence supporting its use in clinical contexts.

In light of such a situation, Beijing Anding Hospital Capital Medical University has cooperated with Beijing Wispirit Technology Co., Ltd to develop the first Serious Game-Interactive CCBT Digital Therapy Product, Aurora, for Depression in China. Combining CCBT principles and serious game features, Aurora builds an "inner safe island" for depressed patients by teaching them CBT skills so that patients can better manage their mild to moderate depressive symptoms during game training. The Aurora program contains twelve modules and each module takes 20-30 minutes to complete. This product can be applied independently or combined with other treatment methods to comprehensively improve efficacy, reduce recurrence rates, and help patients reconstruct their social function during mental therapy sessions. The product is currently in the preparation stage for clinical verification. It is expected to enter a pilot study at the end of 2023, formal trials in April 2024, and be applied to clinical use in 2025.

Keywords: Depression; Serious Games; Computerized Cognitive Behavioral Therapy; Digital Therapy

3.7: Role of CBT in stress management, lifestyle medicine & promoting wellness

63/T3.7/OP/28: Differences in stressors, perceived stress, and coping strategies of students of applied psychology courses of University of Dhaka

Authors: Farzana Ahmed, Dr. Farah Deeba

Contact: farzana.ahmed@add-bangladesh.org

Country: India

Abstract: Background: Higher degree courses in applied subjects demand intensive training and activities that put a lot of stress on the students. Aim: This study aimed at examining the differences in stressors, perceived stress, and coping strategies of students of applied psychology courses of University of Dhaka. Method: Using a sample (N=100) of three different

streams of applied psychology post-graduate degree (clinical, counseling, and educational psychology) students, we conducted a survey to examine the differences in the stressors, perceived stress levels and coping strategies. Findings: Over 85% of students reported a perceived stress level that interfered with their optimal functioning. Significant difference was found between departments in terms of procrastination and financial problems. The mostly used coping strategies were emotion-focused coping and problem-focused coping. We hypothesized that students in clinical psychology would be more vulnerable to some unique stressors and our results confirmed that. Conclusion: Given the high percentage of students experiencing disruptive levels of stress during graduate training programs, it is recommended that the policymakers of these pedagogical streams should take further steps to educate these students about stress and to assist them in developing coping skills.

Keywords: Stress, Perceived stress, Stressor, Counseling, School, Clinical Psychology.

3.12: Others

66/T3.12/OP/30: Implementation of Cognitive Behavior Therapy in Pakistan

Authors: Mirrat Gul Butt, Sadia Abid

Contact: Mirratgul@gmail.com

Country: Pakistan

Abstract: The National Institute of Health and Clinical Excellence (NICE) in the UK and the American Psychiatric Association (APA) in the US both recommend Cognitive Behaviour Therapy (CBT) for a range of emotional and mental health issues due to its robust body of research. However, the majority of research originates in the west. Due to the huge differences in health care systems, cultures and traditions, it is challenging to apply western models of implementation in low- and middle-income countries. PACT team has started working in 2008 and the challenges which we have faced and the procedures through which we tried to implement CBT on a national scale in Pakistan, was a long effort, but it's acceptability by the general public and mental health and health professionals is its success. This is the only instance of CBT implementation at the national level in a country with a low to middle income.

Keywords: Western CBT Research, Low- and Middle-Income Challenges, National-Level CBT Implementation

3.1: Current trends & challenges in high-tech, digital & AI based CBT interventions

75/T3.1/OP/33: Computerized Cognitive Behavior Therapy for Managing Panic Disorder in Bangladesh

Authors: Saima Akther, Nazma Khatun

Contact: saimaakther28@yahoo.com

Country: Bangladesh

Abstract: Technological advancement has created an opportunity to demonstrate psychological service into another level of innovation to meet the need for accessibility. The

objective of the present study was to assess the suitability of computerized cognitive behavior therapy (CCBT) for managing symptoms of panic disorder in Bangladesh. An exploratory sequential mixed method design was applied to achieve the objectives. In the first phase, a qualitative study was done to understand the most effective techniques and the nature of panic disorder in Bangladesh. The second phase was focused on developing the website with the integration of relevant experts. In the third phase, suitability was checked based on the findings of the quantitative study. The total number of enrollments in the first session was 64. Among them, 30 (51.56%) participants completed the entire session. They used the website for three to four months. Three standardized measurements were used to see the suitability. Those were the severity measure of panic disorder adults, panic disorder severity scale, and anxiety scale. Besides, the satisfaction with the treatment scale was translated, and a checklist of subjective ratings for panic symptoms was developed from the finding of the desk review. CCBT significantly reduced the severity of the panic disorder, panic symptoms, and associated anxiety symptoms. The severity of panic symptoms changed significantly post-intervention ($t=$, $p<.001$). A significant change in post-intervention was also shown in the severity of panic disorder ($t=$, $p<.001$). Besides these changes, the severity of anxiety level is also significantly changed ($t=$, $p<.001$) in post intervention. Self-reported rating of symptoms also showed changes in cognitive symptoms, physiological reactions, emotions, and safety behaviors in the post-intervention phase. In the treatment satisfaction scale, participants rated the CCBT package as credible and satisfactory regarding presentability, effective strategies, personal development, and program evaluation. Participants also criticized CCBT for the therapist's absence. This research also suggested areas of improvement, factors to maintain the program, and barriers to the availability of the service. An effective study, including follow-up sessions, is required to ensure further development of the CCBT package.

Keywords: Computerized Cognitive Behavior Therapy, Panic Disorder, Management

3.10: Improving access to Mental Health services for Asian population

79/T3.10/OP/34: Stigmatization and Self-Perception regarding issues related to Mental Health: A qualitative survey from a lower and middle-income country

Authors: Shaffaque Ikhtiar Khan, Muhammad Irfan

Contact: shaffaqueikhtiar@gmail.com

Country: Pakistan

Abstract: Objective: To assess the understanding of the patients with common mental disorders, towards issues related to their mental health.

Methods: This qualitative study was conducted from December 2018 to April 2020. Thirty-four patients, suffering from common mental disorders, were interviewed in public and private sector hospitals of Peshawar. The interviews were recorded, transcribed, translated into English, and themes were generated from their responses. Content analysis was carried out on the data obtained. The themes resulting from each interview were then further comparatively analyzed. Results: The mean age of the sample was 31.9 ± 10.61 years. Most of the patients ($n=24$, 70.6%) were aware that the nature of their illness was a psychological one with a majority ($n=17$, 50%) describing it with the symptoms of headache or burden on the head. Most of the patients ($n=14$, 41.1%) were unaware of the general public opinion towards mental

disorders but those who were aware described these with stigmatizing descriptions e.g., “people call them crazy” etc. Most of the patients (n=20, 58.8%) were unaware about their own opinion regarding their illness and some said that they tried to conceal their illness from others. Unfortunately, most of the patients (n=19, 55.8%) were not aware of mental healthcare professionals or the existence of psychiatry as a profession.

Conclusion: Stigma, both public and personal, was quite high, which caused patients to feel compelled to conceal their illness. There was also a general lack of knowledge with regard to mental disorders in our society. The general public opinion about mental health professionals was not favorable.

Keywords: Mental health, Stigma, Noncompliance

3.7: Role of CBT in stress management, lifestyle medicine & promoting wellness

88/T3.7/OP/41: Developing Resilience and Courage: A CBT Approach

Authors: Dr. Stephanie Rocky Okolo.

Contact: stephessien@gmail.com

Country: USA

Abstract: This abstract introduces a training program designed to empower individuals with the skills and knowledge to cultivate courage and resilience through the application of Cognitive Behavioral Therapy (CBT) techniques. Fear and self-doubt can often hinder personal and professional growth, limiting individuals from realizing their full potential. This training program seeks to address these challenges by delving into the psychology of fear, negative thought patterns, and anxiety. Participants will be guided through a series of practical exercises and strategies, including cognitive restructuring, exposure therapy, mindfulness, and goal setting. Real-life case studies will showcase the effectiveness of CBT in overcoming obstacles and building confidence. Ultimately, this training aims to equip participants with the tools they need to rise above their fears, embrace courage, and take proactive steps toward a more fulfilling and empowered life.

Keywords: Fear and self-doubt, Workplace challenges, Workplace-focused training, Career advancement, Evidence-based techniques, Job satisfaction, Workplace well-being

3.12: Others

90/T3.12/OP/42: Translation, Adaptation, and Validation of the Patient Health Questionnaire-15 for Use in Bangladesh

Authors: Ashik Mahmud, Akib Ul Huque

Contact: ashik.mahmud88.am@gmail.com

Country: Bangladesh

Abstract: This study aims to translate, adapt and validate the PHQ-15 to use it with Bangladeshi People. Using a cross-sectional study design, the Bangla PHQ-15 was administered to a total of 303 participants. To measure the validity of this questionnaire, we

investigated the correlation of the PHQ-15 score with the Revised Bangla Anxiety Scale, Bangla Depression Scale and Bangla Warwick-Edinburgh Mental well-being Scale. Exploratory and confirmatory factor analysis were performed to assess the internal consistency of the PHQ-15. The Bangla PHQ-15 showed good reliability (Cronbach's alpha = 0.841). The correlations of the PHQ-15 scores with the Bangla Anxiety Scale scores ($r = .723$), with the Bangla Depression Scale scores ($r = .584$) and Bangla Warwick-Edinburgh Mental well-being Scale scores ($r = -.297$). These results suggested that the PHQ-15 had convergent and discriminant validity. We identified three factors, referred to as "cardiopulmonary", "pain and fatigue" and "gastrointestinal" which explained 39% of the total variance. Two items (4 and 11) yielded low response rate. The test-retest reliability of PHQ-15 was satisfactory ($r = 0.901$). The PHQ-15 scale had good reliability and high validity to measure the severity of the somatic symptoms. Findings of the current study was consistent with previous studies on the PHQ-15 in other countries as scale can be used as a whole or separately in examining the prevalence of somatic symptoms in Bangladesh. To improve the measurement quality of this questionnaire and to test the two items with low response, further research is needed.

Keywords: PHQ, somatization, Validation, somatic symptoms, Bangladesh

3.6: CBT & Neuroscience

97/T3.6/OP/45: Neuropsychological consequences of Substance use among Female

Authors: Israt Jahan, Shahanur Hossain, Md. Sazzad Hossain

Contact: isratjahan775@gmail.com

Country: India

Abstract: This study investigated the cognitive functions of female individuals with substance dependency, considering the impact of substance abuse on brain structures and functions. It used a cross-sectional design with sixty female participants: forty-one non-substance-dependent individuals in a control group and nineteen substance-dependent individuals undergoing rehabilitation in a clinical group. Assessments included one screening test: Alcohol smoking and Substance Involvement Screening Test (ASSIST) and three neuropsychological tests: Addenbrooke's Cognitive Examination III (ACE-III), Rey Osterrieth Complex Figure Test (RCFT), and Frontal Systems Behavior Scale (FrSBe) to evaluate attention, memory, language, fluency, visuospatial ability and executive function related to frontal brain. Additionally, a checklist of 12 popular positive beliefs about substance use was included. Data were analyzed using an independent-samples t-test in SPSS-22. The findings revealed significant cognitive deficits ($t=4.11$, $p<0.01$) in substance-dependent individuals, notably in the areas of attention, memory, language, fluency, and visuospatial function according to ACE-III. The substance-dependent group performed significantly lower in immediate recall ($t = 2.915$, $p<0.01$) and delayed recall phases ($t = 3.433$, $p<0.01$) of the RCFT test. Moreover, increased executive dysfunction ($t = -2.046$, $p<0.01$) was noted in the clinical group according to the FrSBe, elucidating their tendencies towards relapse and risk-taking behavior. The study also highlighted that substance-dependent individuals exhibited stronger beliefs in cognitive enhancement like enhanced concentration, improved problem-solving and self-esteem, while the control population was inclined towards beliefs in emotional management like decreased depression and pain relief through substance use. It implies substance-dependent individuals

may begin using substances to boost cognition, but as addiction progresses, cognitive function deteriorates. In summary, this study shed light on the cognitive impairments experienced by female substance dependents and how they may affect treatment results, relapse rates, and the emergence of neurological and psychological conditions that can be utilized for creating customized treatment programs and taking preventive measures.

Keywords: Substance dependency, neuropsychology, cognitive impairments, substance abuse impact.

3.3: CBT Interventions in Work Settings

108/T3.3/OP/48: CBT interventions in Work Settings

Authors: Chinu Agrawal, Nithya Sriram, Sai Sudha Saini

Contact: drchinu.agrawal@gmail.com

Country: India

Abstract: Stress in work settings has been investigated by researchers and is a known factor which affects employee's job satisfaction. Job satisfaction is the pleasurable emotional state resulting from the appraisal of one's job as achieving or facilitating the achievement of one's job values. Mindfulness, a cognitive skill helps one to stay in the present moment has been researched as a potential intervention technique.

The aim of this study is to explore whether the practice of mindfulness mediates the relationship of workplace stress and job satisfaction. Data will be collected using self-report questionnaires from 100 participants working in corporate settings with at least 5 years of experience. The tools used would be The Work questionnaire by Holmgren, Five Facet Mindfulness Questionnaire by Baer and Smith and the Minnesota Satisfaction Questionnaire by Locke. Appropriate statistical techniques will be used to analyse the data. The study could provide valuable insights into the potential benefits of mindfulness based interventions in reducing workplace stress and enhancing job satisfaction among employees. The results will be shared during the presentation.

Keywords: CBT intervention, stress, Job satisfaction, Mindfulness

3.7: Role of CBT in stress management, lifestyle medicine & promoting wellness

109/T3.7/OP/49: Investigating the Influence of Dysfunctional Attitude on the Quality of Life of Nurses: The Moderating Role of Coping Strategies

Authors: Dr Chinu Agarwal

Contact: chandana.bhuyan@gmail.com

Country: India

Abstract: Nursing is an inherently demanding occupation marked by elevated stress levels, emotional strain, and the presence of challenging work settings. Nurses routinely encounter circumstances that can have a considerable impact on their mental well-being and overall quality of life. Dysfunctional attitudes can contribute to compromised quality of life among

nurses. This research seeks to investigate the effects of dysfunctional attitudes on nurses' quality of life while also delving into the moderating impact of coping strategies. Data for this study will be collected through surveys conducted among 100 nurses from various hospitals in the vicinity of Guwahati, Assam, India. The survey questionnaires employed will include the Dysfunctional Attitude Scale developed by Weissman and Beck, the Brief-Coping Orientation to Problems Experienced Inventory (Brief-COPE) created by C.S. Carver, and the World Health Organization Quality of Life questionnaire (WHOQoL). The study will employ correlational statistical analysis to examine the relationships in the data, and the findings will be shared during presentation.

Keywords: nurses, dysfunctional attitudes, coping strategies, quality of life

3.5: Efficacy of third wave CBT approaches & way forward

114/T3.5/OP/53: Efficacy of Integrated Yoga Nidra based Comprehensive Intervention as measured by Autonomic Nervous System Functions in Adolescents with Substance Use Disorders: A proof of concept, open-label study

Authors: Andree, , Nishant Goyal, Madhumita Bhattacharyya

Contact: andree.jaiswal@gmail.com

Country: India

Abstract: Aim and Methodology: The index study aims to assess the efficacy of integrated yoga nidra based comprehensive intervention in adolescents with substance use disorder with a history of childhood trauma and parental substance exposure. To compare the extent of various outcome measures including craving, emotional regulation, problem-solving, decision-making, self-efficacy quality of life, cardiac autonomic functioning and autonomic regulation at pre and post intervention level. The sample consisted of 10 adolescents aged 12-19 years who received the integrated yoga nidra based comprehensive intervention. The proposed intervention module consisted of 12 sessions with 45-60 minute sessions every alternate day. Participants completed self-report measures of craving, problem-solving, decision-making, self-efficacy, emotional regulation, and quality of life and autonomic nervous system activity was also measured pre and post-treatment (at 4 weeks).

Summary of Results: The mean age of the participants was 16.90 years, all participants had completed their primary education, and the mean duration of illness was 3 years. 40% of the participants were diagnosed with alcohol dependence, 30% were dependent on sedatives/hypnotics, 20% had cannabinoid dependence and 10% had alcohol dependence. It was found that there was a significant reduction in craving, problem-solving and decision-making skills, self-efficacy, overall quality of life and emotional regulation skills in adolescents with substance use disorders receiving the proposed intervention. Also, there was a significant improvement in total autonomic activity, heart rate and autonomic physical dysregulation.

Conclusions: Therefore, the integrated yoga nidra based comprehensive module could help reduce craving and improve the overall quality of life, emotional regulation skills, self-efficacy, problem-solving and decision-making skills and autonomic activity in adolescents with substance use disorders.

Keywords: Adolescents, Substance use disorders, Yoga Nidra, Autonomic nervous system

3.7: Role of CBT in stress management, lifestyle medicine & promoting wellness

128/T3.7/OP/59: Application of CBT in School Mental Health: Challenges and Prospects in Bangladesh

Authors: Zohora Parveen

Contact: cpzohora@gmail.com

Country: Bangladesh

Abstract: This conceptual paper originates from the reflexive process of experiential learning at workplace. The paper was prepared on the working experiences with secondary level students of a renowned and large educational institution in Bangladesh. This paper aims to demonstrate the influence of CBT in school mental health to contribute at the preventive level to preclude mental health disorders and to promote psychological well-being of the students in Bangladesh. While Bangladesh is crossing a rapid transition, the young generations are facing lots of challenges impacting on their mental health. Moreover, prevailing strong stigma and discrimination in this region hinders the accessibility of the mental health services. However, a CBT practitioner working in the school setting may be a privilege for the students. Issues that the students brought up in their sessions were bullying, anger outburst, self-harm/suicidal ideation, exam phobia, poor concentration in study, academic failure, anxiety/stress due to study pressure, sleep difficulty, lack of social skill, difficulty in making friendship, family conflict etc. Several CBT techniques were applied which were very useful for the students such as psychoeducation including the psychological theories (Carl Rogers, Abraham Maslow, Ellis etc), socialization of Five Part Model, metaphor and analogical evidence, thought challenge, positive data log, relaxation, PMR, graded task, down ward arrow technique, and so on. The improvement was crystal clear compared to their baseline data on their issues such as decrease of physical/psychological symptoms, increased happiness and satisfaction, enhanced confidence to deal with their environmental issues, improved academic grades, and finally being more functional and productive having a meaning for their life. There were several challenges when few basic principles of CBT could not be applied properly. Students could not match their time to continue sessions as they are not allowed to miss any class. Session duration was not for 40-45 minutes. School authority created pressure to disclose the name list of the self-referred students including some information. They also instructed to stop self-referral and also to be available over the phone all the time and to receive phone calls even during the sessions. There were some prospects as well such as increased referral from the head/principal/coordinators and also from the teachers'/staff members; increased self-referred students and teachers; referred by friends; scope of meaningful work in triangulation with the student, their parents and their teachers together; scope to work with large group applying CBT to keep a huge impact in society. Approval of external supervision by the previous Head also an indicator of prospect which means that they acknowledge the supervision process. Reflections from the students were very appealing which manifest the notion that CBT application is impactful and well fits in the school setting.

Keywords: CBT, School Mental Health, Challenges, Prospects

3.2: Role of CBT in Community Health and Capacity Building

131/T3.2/OP/61: Use of CBT in a community-driven approach to promoting mental health and preventing suicide in Bangladesh

Authors: Abdullah Al Harun

Contact: harun.abdullah@add-bangladesh.org

Country: Bangladesh

Abstract: This conceptual paper originates from the reflexive process of experiential learning at workplace. The paper was prepared on the working experiences with secondary level students of a renowned and large educational institution in Bangladesh. This paper aims to demonstrate the influence of CBT in school mental health to contribute at the preventive level to preclude mental health disorders and to promote psychological well-being of the students in Bangladesh. While Bangladesh is crossing a rapid transition, the young generations are facing lots of challenges impacting on their mental health. Moreover, prevailing strong stigma and discrimination in this region hinders the accessibility of the mental health services. However, a CBT practitioner working in the school setting may be a privilege for the students. Issues that the students brought up in their sessions were bullying, anger outburst, self-harm/suicidal ideation, exam phobia, poor concentration in study, academic failure, anxiety/stress due to study pressure, sleep difficulty, lack of social skill, difficulty in making friendship, family conflict etc. Several CBT techniques were applied which were very useful for the students such as psychoeducation including the psychological theories (Carl Rogers, Abraham Maslow, Ellis etc), socialization of Five Part Model, metaphor and analogical evidence, thought challenge, positive data log, relaxation, PMR, graded task, down ward arrow technique, and so on. The improvement was crystal clear compared to their baseline data on their issues such as decrease of physical/psychological symptoms, increased happiness and satisfaction, enhanced confidence to deal with their environmental issues, improved academic grades, and finally being more functional and productive having a meaning for their life. There were several challenges when few basic principles of CBT could not be applied properly. Students could not match their time to continue sessions as they are not allowed to miss any class. Session duration was not for 40-45 minutes. School authority created pressure to disclose the name list of the self-referred students including some information. They also instructed to stop self-referral and also to be available over the phone all the time and to receive phone calls even during the sessions. There were some prospects as well such as increased referral from the head/principal/coordinators and also from the teachers'/staff members; increased self-referred students and teachers; referred by friends; scope of meaningful work in triangulation with the student, their parents and their teachers together; scope to work with large group applying CBT to keep a huge impact in society. Approval of external supervision by the previous Head also an indicator of prospect which means that they acknowledge the supervision process. Reflections from the students were very appealing which manifest the notion that CBT application is impactful and well fits in the school setting.

Keywords: CBT, School Mental Health, Challenges, Prospects

3.8: CBT interventions for special and marginalized populations

139/T3.8/OP/63: Cognitive Distortions of Cisnormativity among Family Members of Queer Individuals

Authors: Gayathri .S

Contact: sabhyatibrewal1702@gmail.com

Country: India

Abstract: Background: Cisnormativity is the idea that cisgender people (people whose gender matches the body they were born with) are normal or right and all other people(queer /sexual minorities) are not. It has become apparent in queer affirmative therapy that queer individual has distress associated with expression of cisnormativity in family which consequently results in feeling of invalidation and perceived family unacceptance. This research aimed to explore difference between perceived family acceptance and feelings of protectiveness on queer individual based on presence of cisnormativity in family members attending therapy. It also analyses presence of Cognitive Distortions based on cisnormative constructs.

Methods: A hospital based pre and post intervention study was conducted with 20 patients who were selected for queer affirmative family therapy. Group I consisted of family members of queer individuals with cisnormativity. Group II consisted of family members of queer individuals without cisnormativity.

Results: cisnormativity were recorded over pre and post therapy sessions Group I reported significant presence of cisnormativity showed perceived family unacceptance and feeling of invalidation and lack of feeling of protective factor in queer individual when compared to group two. Comparison of pre and post intervention shows significant reduction in cisnormativity in group 1 and Findings also suggests significant increase of family acceptance, feeling of validation and feeling of family as protective factor in queer individuals.

Keywords: Queer affirmative CBT, CBT, queer population, cisnormativity

3.7: Role of CBT in stress management, lifestyle medicine & promoting wellness

145/T3.7/OP/65: Public Performance Anxiety Among Young Adults - Role of CBT

Authors: Kaustav Ghosh, Susmita Halder

Contact: kaustavghosh01@gmail.com

Country: India

Abstract: To explore the scope of the application of CBT in individuals with public performance anxiety.

Rejection is the non-acceptance or refusal of a proposal or idea. Some people are more sensitive to rejection than others. Because rejection can take place in a variety of contexts in our daily lives, people who are highly sensitive to rejection may have a substantial negative impact for the same in their daily lives. For example, many people have difficulty with performing in public. One of the possible reasons for this difficulty is fear of rejection leading to high levels of anxiety when performing in public. This can be due to high concerns about how the audience would perceive them and their speech and because they expect that they are a bad orator. Intervention should therefore be individualized considering the specific etiological genesis.

CBT in conjunction with other skills training can be used to reframe their beliefs, increase their confidence and thereby reduce their anxiety levels and help them perform better in public. 8 participants were included in the study who reported public performance anxiety. A brief structured interview was conducted to explore the possible causal factors. Based on the causal factors found, a comprehensive cognitive behavioural intervention has been planned consisting of two parts, one with common techniques applicable to all and another with individualized techniques for each individual's specific need.

Keywords: public performance anxiety, rejection sensitivity, cognitive behavioural intervention, young adults

3.12: Others

147/T3.12/OP/67: Challenges in Implementing Cognitive Behavioral Therapy (CBT) with the Indian Population: A Thematic Analysis of Experienced Practitioners' Perspectives

Authors: Dr. Chinu Agrawal, Ambika Warriar, Sri Abinaya Balasubramanian

Contact: drchinu.agrawal@gmail.com

Country: India

Abstract: Cognitive behavioral therapy (CBT) enjoys significant popularity in India, with a substantial following among practitioners. In the context of diverse and culturally rich settings in India, the effective implementation of Cognitive Behavioral Therapy (CBT) faces the challenge of reconciling its Western origins with local belief systems and societal norms, necessitating the development of culturally sensitive and customized approaches for mental health practitioners. Additionally, the intricate dynamics of education, socio-economic status, rural-urban distinctions, age groups, caste affiliations, religious beliefs, regional variations, and linguistic diversity pose further challenges in implementing CBT within the Indian population, underscoring the need for this research to explore and address these multifaceted barriers. This qualitative study explores the challenges faced by experienced Cognitive Behavioral Therapy (CBT) practitioners with a minimum of five years of experience while catering CBT to the diverse Indian population. The research employed in-depth interviews with a cohort of highly experienced CBT therapists to extract valuable insights into the specific hurdles encountered in this cultural context. A thematic analysis was conducted to distill and categorize the identified challenges. The findings illuminate several key themes, providing a comprehensive understanding of CBT practice in the context of India. These themes encompass the influence of cultural nuances on therapeutic rapport and engagement, the persistence of mental health stigma, the necessity of adapting CBT techniques to align with local belief systems and societal expectations, challenges related to language barriers, clients' reluctance to explore their behaviors and thoughts, as well as the impact of the diverse Indian diaspora. Furthermore, the results shed light on the impact of technical features of CBT, such as the adaptability of traditional CBT methods to India's unique circumstances. These insights provide valuable guidance for mental health professionals aiming to enhance the efficacy of CBT interventions in India and other culturally diverse contexts.

Keywords: Cognitive Behavioral Therapy, Indian population, Practitioner's perspective

3.7: Role of CBT in stress management, lifestyle medicine & promoting wellness

172/T3.7/OP/83: Role of CBT in Stress Management & Promoting Wellness Among Gen Z in Chennai: A Thematic Analysis of Therapists' Experience

Authors: Anisa Sadaf J, Roshini R.K, Dhanalakshmi Divya G

Contact: anisasadafj@gmail.com

Country: India

Abstract: Gen Z is a population cohort born between 1997–2012 (Pew Research Center, 2023). Deloitte's Millennial & Gen Z Survey, 2021 for India states that Gen Z feel as anxious and stressed as their global average (46 percent). Fiama Mental Wellbeing Survey (2022) reported that Gen Z is more proactive in seeking professional help for their mental health. Around 47% of those surveyed in this age group reported seeking professional help. Psychotherapy involves a profound interpersonal experience for both the client and the therapist (Hoyt, 2001; Kantrowitz, 1997). Successful therapy, regardless of its approach, goes beyond the mere skillful use of techniques as it pivots also on the therapist's inner experience, which influences the selection of techniques and also their application (Gelso & Perez-Rojas, 2017). Understanding CBT for stress management from an experiential perspective of therapists can offer valuable insights that enrich our conception of the difference between theory and its practical application for the Gen Z population. Thus, the study aims to understand the role of CBT in stress management and promoting wellness among Gen Z in Chennai from therapists' perspective. A qualitative research method is adopted to the study and purposive sampling method will be used to select the participants for the study. The estimated sample size for the study is 15 therapists. The inclusion criteria includes: (1) Psychotherapist who has worked with CBT for at least a year and (2) Active therapists who have experienced working with Gen Z to manage stress and promote wellness using CBT and/or its derivatives. The exclusion criteria: Those who are not certified CBT therapists from an accredited institution and CBT therapists who have not worked with Gen Z in Chennai. Semi-structured interview will be conducted to collect the data from the participants. Interviews will be audio-taped and verbatim will be transcribed during the study. Thematic analysis will be used to interpret the collected data. The results and conclusion of the study will be discussed in the full-paper.

Keywords: CBT, stress management, promoting wellness, thematic analysis, therapist experience, Gen Z

3.11: Role of CBT in holistic medicine and trans-diagnostic models

173/T3.11/OP/84: Cognitive Behavioral Therapy and Satvavajaya Chikitsa in Ayurveda

Authors: Dr. Deepika, Meera K. Bhojani

Contact: deepikasaini539@gmail.com

Country: India

Abstract: Satvavajaya Chikitsa, mentioned by Ayurveda texts, is a treatment modality broadly used as counseling for somatic and psychological disorders as well. It is based on the principle

of restraining the mind which is attained by Gyan, Vigyan, Smriti and by using practices of Achar Rasayan (behavior and moral code of conduct). Satvavajaya means 'conquering one's mind'. Necessity of Satvavajaya Chikitsa has been growing due to faulty lifestyle. Also, one of the root cause of diseases is Prgya-aparadha, the conscious misuse of intellect. Hence, to make people aware about Hita arthas for the mind satvavajaya is required. Cognitive behavioral therapy (CBT) also comes under the purview of Satvavajaya Chikitsa. Both emphasize over changing the maladaptive behaviours and imbibing the positive and rational thoughts. This article is an attempt to explore psychotherapeutic technique of cognitive behavioural therapy in the perspective of Satvavajaya Chikitsa.

Keywords: satvavajaya, Achar rasayan, Cognitive behavioral therapy (CBT)

3.11: Role of CBT in holistic medicine and trans-diagnostic models

174/T3.11/OP/85: A Qualitative Study to Explore Cognitive Components of Meaning in Life Among Elderly

Authors: Meenakshi Gupta, Amool R. Singh

Contact: meenakshig09@gmail.com

Country: India

Abstract: Background: Depression is one of the most common mental health disorders in the late-life population and decrease quality of life. In the literature it has been show that depression is negatively corelated with Meaning in life. Hence, it is important to explore the dimensions of Meaning in Life among elderly. This can further help in developing a management or treatment module adding their perspectives which will help to provide buffer from depression in Elderly. Objectives: To explore dimensions of meaning of life from perspectives of elderly with depression. Materials and Method: A total of 20 participants, aged between 65-75 years were selected using method of purposive sampling. Focus Group Discussion was conducted with the sample group. Semi-structured interview guide was made for this study to conduct Focus Group Discussion. The data was analysed using thematic analysis. Results and Conclusion: The findings will be discussed in the reference of literature.

Keywords: Elderly, Geriatric Depression, Qualitative, Dimension of Meaning in life.

3.11: Role of CBT in holistic medicine and trans-diagnostic models

182/T3.11/OP/91: Ashtanga Yoga - Taking Ayurveda wisdom of Cognitive Behavioural Therapy from classics to clinic

Authors: Dr. Swati Verma, Meera K. Bhojani

Contact: drsv2702@gmail.com

Country: India

Abstract: Triguna (Sattva, Rajas and Tamas) are psycho-spiritual attributes of universal consciousness threading through the psyche of living beings. They dictate the psychological processes of the human mind. Sattva is immaculate. Rajas and tamas are delusional and dull

being responsible for all psychological morbidities by overpowering Sattva Guna, only when an individual overindulges in unwholesome objects of senses.

Ashtanga Yoga is an eight-fold therapeutic regimen designed to employ one or more principles of Satvavjaye Chikitsa (the therapeutic techniques for winning over fickle natured mind) viz. Jnana (Cognition), Vijnana (Worldly knowledge), Dhairya (Fortitude), Smriti (Memory) and Samadhi (Collective consciousness). The practices of Ashtanga yoga are categorised under two divisions namely Bahiranga Yoga and Antaranga Yoga, with a collective aim of manonigraha (withdrawal of senses from unwholesome objects and directing them towards wholesome objects of senses).

Bahiranga Yoga is the set of rules and practices to detach the mind from unwholesome material desires and objects of the senses. It comprises Yama (Rules for moral code), Niyama (Observances for personal discipline), Asana (Physical exercises), Pranayama (Controlled and extended breathing) and Pratyahara (Withdrawal of senses from unwholesome objects).

Antaranga Yoga are the techniques to foster mindfulness and oneness within oneself. It comprises Dharana (Concentration), Dhyana (Meditation) and Samadhi (Complete realisation). By control of Prana (vital force), Pranayama blossoms patience and self-control to prepare the mind for Pratikandha chikitsa i.e. Replacement of emotions.

Hence deranged manodosha (morbid rajas and tamas) are holistically alleviated via Satvavjaye chikitsa, which itself is achieved through practices of Ashtanga yoga. Satata abhyasa i.e., consistent practice of this eight-fold regimen is reinforced by constant Ashwasana (Reassurance) and Suhrita vakya (friendly guidance) of the skilled physician.

Keywords: Ashtanga Yoga, Satvavjaye Chikitsa, Emotions, Cognitive Behavioural Therapy

3.12: Others

186/T3.12/OP/95: Assessing Family Accommodation in Relation to Severity and Dimensions of Obsessive- Compulsive Disorder

Authors: Rahul Sharma, Ranjeet Kumar

Contact: rahulsharma06456@gmail.com

Country: India

Abstract: Background & Aim: Family accommodation (FA) can be defined as the process in which members of a family help or become a part of patient's illness rituals, such as feeling the obligation to help the patient with his/her illness behaviour (Cooper, 1996). FA acts in opposition to the goals of first line intervention of OCD, i.e., Exposure and Response Prevention (Geller & March, 2012; McGuire et al., 2015). Therefore the phenomenon of family accommodation needs attention while dealing with OCD patients using Cognitive Behaviour Therapy approach. The aim of this study was to assess family accommodation in relation to severity and dimensions of obsessive compulsive disorder.

Materials and Method: A total of 40 patients diagnosed with OCD along with one of their family member, both aged between 18-60 years were chosen using purposive sampling from clinical population visiting the Gwalior Mansik Arogyashala OPD, a tertiary care hospital. Yale – Brown Obsessive Compulsive Scale (Y-BOCS) was used to evaluate the severity of OCD symptoms in the patients, the severity of the different OCD symptom dimensions of patient was measured using Dimensional Yale-Brown Obsessive-Compulsive Scale (DY BOCS),

Family Accommodation Scale for Obsessive-Compulsive Disorder Interviewer Rated (FAS-IR) was used for understanding accommodation level in the family, Hamilton Depression Rating Scale (HDRS) was used to assess the level of depression (if any) present in the patient and Mini International Neuropsychiatric Interview (M.I.N.I.) v.6.0.0 was used to rule out comorbid psychiatric disorders in patients (except Anxiety and Depression). A Pearson's Correlation was used to evaluate the association of family accommodation with symptom severity and dimensions of Obsessive Compulsive Disorder respectively.

Results: Accommodation behaviour was found to be highly prevalent among family members of OCD patients. The most common form of family accommodation was found to be providing reassurance and tolerating odd behaviours. A high correlation was found between severity of OCD and family accommodation. Family accommodation was found to be positively correlated at moderate level with subscale of D-YBOCS including contamination and cleaning. Subscales of D-YBOCS including hoarding & collecting; symmetry, ordering, counting & arranging; somatic were found positively correlated but not at significant level. Whereas, aggressive obsessions & related compulsions; sexual & religious obsessions & compulsions; miscellaneous were found to be negatively correlated with FAS but not at the significant level. Conclusion: The findings suggests that family accommodation is very common among family members of OCD patients, with providing reassurance being the most common. The symptoms that are explicit in nature and acceptable to the family members are found to be positively correlated whereas the symptoms that are implicit in nature and also less acceptable to the family members were not accommodated by the family members.

Keywords: Family accommodation, obsessive- compulsive disorder, dimensions of obsessive- compulsive disorder

3.12: Others

197/T3.12/OP/97: Beliefs about procrastination and Self-regulation: The Way Forward

Authors: Jemimah A. Johnson, Paulomi M Sudhir

Contact: jemimah2496@gmail.com

Country: India

Abstract: Procrastination has been a pervasive phenomenon which has been studied over the last four decades with little consensus. Research suggests that metacognitive beliefs about procrastination play a role in procrastination. The present study aimed to explore metacognitive beliefs about procrastination and examine the relationship between beliefs about procrastination, perfectionism, emotion regulation, self-regulation on procrastination and psychological distress. A community sample (N=245), between 20-50 years of age was recruited using purposive sampling, utilising a cross-sectional research design. Standardised tools were used to measure the study variables.

Findings indicate that procrastination is viewed as problematic by majority of the sample with reported association with negative emotions. The domains of overall well-being, work, and health were most affected with majority of the participants using task-based coping to deal with procrastination. Procrastination and psychological distress had significant positive correlation with positive and negative metacognitive beliefs, maladaptive cognitive emotion regulation strategies, and negative correlation with evaluative concerns, self-regulation, planning, positive

reappraisal, age, and cognitive flexibility (avoidance) ($p < 0.001$). Path analysis indicated that negative metacognitive beliefs had indirect effect on procrastination through cognitive flexibility (avoidance) and self-regulation. Positive metacognitive beliefs had direct effects on procrastination and the indirect effects were mediated by self-regulation.

The findings have both theoretical and clinical implications; with potential for designing targeted interventions to address procrastination. While the study further strengthened the frameworks of procrastination as a self-regulation failure and as a short-term mood repair, it also provides novel insight regarding the predictive role of negative and positive metacognitive beliefs in procrastination and psychological distress. This helps in including cognitive strategies, along with the behavioural and task-based methods for addressing procrastination. On an implementational level, given the role of negative emotional states associated with procrastination and high personal distress, individuals might benefit from being supported through forums/ positive reappraised messages or perspectives.

Keywords: procrastination, metacognitive beliefs, emotion regulation, self-regulation, psychological distress

3.2: Role of CBT in Community Health and Capacity Building

203/T3.2/OP/99 Group Cognitive-Behavioral Therapy for Community-Dwelling Young Adults with Social Isolation and Social Anxiety During the Post-COVID-19 Pandemic: A Feasibility Study

Authors: Juhee Choi and Minjung Kang

Contact: cjhee0112@gmail.com

Country: China

Abstract: Introduction: The COVID-19 pandemic has intensified the issue of social isolation among young demographics. This isolation detrimentally impacts mental health and overall vitality, potentially leading to an increased risk of social anxiety disorder (SAD). SAD among youth adversely affects social interactions, further reinforcing the cycle of isolation. The current study aimed to assess the feasibility and preliminary efficacy of a group cognitive-behavioral therapy (GCBT) for socially isolated young adults with SAD in a community context.

Method: A total of 31 individuals aged 19 to 34 experiencing social anxiety symptoms were enrolled in a group CBT program from June to November 2023. The group CBT was delivered in person, comprising 10 weekly sessions, each lasting 150 minutes. The analysis focused on 10 participants who completed all sessions ($M = 27.20$, $SD = 2.10$, 70% women). Measures included the L-SAS, Korean version of the Social Interaction Anxiety Scale (K-SIAS), general anxiety (MHS:A), fear of negative evaluation (Brief Fear of Negative Evaluation, BFNE), and loneliness (a short form of the UCLA Loneliness Scale, UCLA), assessed at pre-treatment, post-treatment, and follow-up. Additionally, changes in social anxiety were monitored session-by-session using the Social Anxiety Session Change Index (SASCI).

Results: The LSAS, SIAS, FNE, and UCLA scores significantly decreased from pre- to post-treatment and at the one-month follow-up, as determined by paired t-tests, with large effect sizes (Hedges' g ranging from 0.75 to 2.16 at pre- to post-treatment, and from 1.09 to 2.62 at pre- to follow-up). Of all participants, 70% (LSAS) and 80% (SIAS) experienced clinically

significant change at post-treatment, and 60% (LSAS) and 20% (SIAS) at follow-up, as analyzed by reliable change indices (RCI) and clinical significance analysis (CSC).

Conclusion: The findings support the feasibility and treatment benefits of addressing social anxiety among socially isolated young adults in Korean communities, which appeared to persist at the one-month follow-up.

Keywords: Social isolation, Social anxiety, Group cognitive-behavioral therapy

3.10: Improving access to Mental Health services for Asian population

212/T3.10/OP/103: The Effect of Online Short-Term Integrated Psychotherapy on Individuals with Mood or Anxiety Disorder using Outcome Measures

Authors: Dr Supriya Malik, Palkee Baruah

Contact: supriyamalik@embracelives.com

Country: India

Abstract: Background. Mental health disorders are increasingly recognized as leading causes of disease burden. The Lancet Commission on global mental health and sustainable development emphasized mental health as a fundamental human right and essential to the development of all countries (Lancet, 2020). According to the recent study (Shidhaye, et al. 2020), one in every seven Indians was affected by mental health disorders (197.3 million people, 95% uncertainty interval [UI] 178.4–216.4), the proportional contribution of mental health disorders to the total disease burden in India almost doubled from 1990 to 2017 (increasing from 2.5%, 95% UI 2.0–3.1, in 1990 to 4.7%, 3.7–5.6, in 2017), and marked regional variations in the prevalence of disorders were observed. The study suggests that improving access to evidence-based mental health services is the only way forward to address this huge burden of mental health disorders in India. We tried to address this in our outpatient service with online short-term integrated psychotherapy and see its effectiveness.

Aim. The study aims to examine whether online short-term integrated psychotherapy is effective in symptom reduction in the population diagnosed with mood or anxiety disorder in India.

Method. The research study has a total number of 40 out-patient population diagnosed with mood or anxiety disorder in India for the study. Participants were selected through purposive sampling. The outcome measures were Patient Health Questionnaire and General Anxiety Disorder (PHQ-9 and GAD-7).

Results. The findings will be discussed once the quantitative analysis has been completed.

Conclusions. The findings of the study might indicate significant benefits of online short-term integrated psychotherapy and significant symptom reduction from the first session to the last session. Further studies should focus on the choice of optimal length of therapy and the selection of factors predicting outcome of short- vs. long-term therapy.

Keywords: anxiety, depression, online psychotherapy, CBT, outcome measures

3.8: CBT interventions for special and marginalized populations

213/T3.8/OP/104: Redefining Rehabilitation: The Role of Forensic CBT in India's Correctional System through Samarth

Authors: Dr Reena Sharma

Contact: connect@themindpractice.in

Country: India

Abstract: The rehabilitation of offenders poses challenges within the criminal justice system. While vocational skill-based programs have been implemented in prisons there is a lack of research on therapeutic interventions aimed at cognitive transformation. In contrast international correctional systems have shown success with rehabilitation; however such approaches are relatively new in India.

The objective of this study is to introduce 'Samarth; Breaking Barriers,' a rehabilitation program specifically designed for the Indian correctional system. Launched in February 2017 it combines Forensic Cognitive Behavioral Therapy (CBT) with principles from criminology to address offender cognition and promote reintegration into society.

At the Samarth; Breaking Barriers Center we have. Implemented Samarth by utilizing Forensic CBT techniques to enhance competence, teach pro-social problem-solving skills and facilitate cognitive restructuring. This program goes beyond criminology by examining offenders' mindsets and disrupting criminal thought patterns. We measure its effectiveness through improvements in competence, restoration of dignity and readiness for change among participants.

Samarth has been implemented across four prisons in Gujarat. Has already made a significant impact on over 9000 prisoners so far. Preliminary results indicate enhancements in competence and pro-social skills among participants indicating a positive shift away from criminal behaviors.

In conclusion, Samarth represents an effort towards offender rehabilitation, in India. With an emphasis on emotional factors this initiative has demonstrated promising results in promoting positive transformations. However, it is crucial to conduct research to assess its long-term effectiveness and applicability, in correctional settings.

Keywords: Rehabilitation of offenders, therapeutic intervention, forensic cognitive-behavioural therapy (CBT) positive criminology, India restructuring of cognition, Samarth Program

3.7: Role of CBT in stress management, lifestyle medicine & promoting wellness

221/T3.7/OP/107: Reciprocal Relationships between Positive Expectancies and Positive Emotions during the COVID-19 Pandemic: A Cross-Lagged Panel Study

Authors: Petronela Predatu, Daniel David, Irving Kirsch, Stelian Florean, Răzvan Predatu

Contact: petronelablaga@psychology.ro

Country: Romania

Abstract: Introduction: In this study, we investigated the relationships between optimism, three forms of positive expectancies (response expectancy, response hope, and the discrepancy

between response hope and response expectancy), and positive emotions during the COVID-19 pandemic. First, we explored the best predictor for short-term (T2–2weeks) and long-term (T3–4months) positive emotions. Second, we examined reciprocal relationships between variables.

Methods: The sample comprised 271 participants (Mage=29.2 years, 84.7%females). Four cross-lagged models were tested.

Summary of results: In Model 1, response expectancy at T1 predicted positive emotions, optimism, and response hope at T2, while positive emotions at T1 predicted each type of positive expectancy at T2. In Model 2, response expectancy at T1 predicted optimism at T3, while optimism at T1 predicted positive emotions at T3. Additionally, the response hope at T1 negatively predicted optimism at T3. In Model 3, the discrepancy score at T1 negatively predicted optimism and positive emotions at T2. In Model 4, the discrepancy score at T1 negatively predicted optimism at T3, while optimism at T1 predicted positive emotions at T3.

Conclusions and discussion: Positive expectancies and positive emotions are closely linked. Positive expectancies affect emotional and cognitive outcomes. Psychological interventions aimed at increasing positive expectancies may improve individuals' functioning in stressful situations.

Keywords: positive emotions, response expectancy, response hope, optimism, COVID-19 pandemic, longitudinal study

3.8: CBT interventions for special and marginalized populations

226/T3.8/OP/109: Enhancing parents' understanding of their non-binary youth

Authors: Dr Meghna Singhal

Contact: meghnasinghal3@gmail.com

Country: India

Abstract: Nonbinary gender identities are prominent among gender diverse youth, having increased significantly over the last decade. Leading theories in support of gender diversity argue that greater acceptance, the availability of more descriptive and inclusive language, and diverse sociocultural forces are needed to inculcate greater acceptance and inclusion of nonbinary youth.

Although there is paucity of research on parents of nonbinary youth from Asia, limited evidence shows that parental response to their children's gender identity is characterised by lack of acceptance.

This qualitative research aimed to explore parental response to their nonbinary young people, assess the barriers to an inclusive attitude, and enhance understanding of their children's gender identity in a sample of 3 parent-youth dyads from Bangalore, India.

This research aims to highlight the unique trajectories of parents, who were able to confront their core beliefs using a CBT intervention and stepped into leadership. It discusses the need to creative supportive spaces for parents of nonbinary children, but without lumping their experiences as being common to all transgender families.

Keywords: nonbinary, youth, special populations, CBT, parenting

3.12: Others

229/T3.12/OP/111: The Moderating Role of Grit in the Relationship Between Perfectionism and psychological distress among PhD scholars

Authors: AR.Rakshena, Pujitha.M, Aadhithya.M

Contact: rakshena16@gmail.com

Country: India

Abstract: Introduction: Perfectionism, as a stable personality trait, manifests itself in unrealistic standards, overly strict self-evaluation and extreme all-or-nothing thinking, which could result in a series of negative outcomes (Frost et al., 1990). Studies have explored perfectionism and its effect on psychological well-being. Grit is a personality trait characterized by perseverance and passion for achieving long-term goals.

Aim: To assess the relationship between perfectionism and psychological distress and to investigate the mediating role of grit among Ph.D scholars.

Methods: Estimated Sample size includes 200 PhD scholars selected using convenience sampling method. The participants are selected within the 23-35 age group and are studying in Chennai. The tools are Short grit scale (Duckworth, A.L, & Quinn, P.D. 2009), Frost multidimensional perfectionism scale (Frost et al.1990), and The Kessler Psychological Distress Scale (K10) (Ron Kessler and Dan Mroczek, 1992). Quantitative measures and correlation analysis will be used.

Results: Expected outcome There will be significant correlation between psychological distress and perfectionism and grit can have an impact on psychological distress.

Conclusion: The findings aim to provide insights into the cognitive behavioral aspect of perfectionism by Shafran et al.(2002)and inform targeted interventions for promoting mental health within the demanding context of doctoral education.

Keywords: Perfectionism, psychological distress, grit, perseverance

3.5: Efficacy of third wave CBT approaches & way forward

230/T3.5/OP/112: Exploring the Lived Experiences of Participants with Anxiety Disorders after Undergoing an Individually Tailored Mindfulness-Based Intervention Program: A Case Series

Authors: Suvosree Bhattacharya, Pritha Mukhopadhyay, Anindita Choudhury

Contact: suvosree.bhattacharya21@gmail.com

Country: India

Abstract: Background: Mindfulness-based interventions (MBIs) have shown effectiveness in anxiety disorders with most studies suggesting moderate level of efficacy. The available studies are mostly based on outcome and efficacy measures of intervention following group based MBI protocols. In the current study participants underwent an individually tailored MBI program to see how it can address the unique challenges of each individual in combating their distress and helping them to learn new skills to handle their anxiety.

Methodology: The current case series had seven participants. All of them had a primary diagnosis of anxiety and underwent an individually tailored MBI program spanning over approximately 3 months. An intensive in depth interview was conducted minimum of 6 months after the completion of the MBI program. The interviews were conducted only on those participants who had maintained a regular Mindfulness Practice regime after completion of the program. The interviews were transcribed and analysed using Interpretative Phenomenological Analysis

Result Analysis: The analysis revealed significant improvement in participants and three important themes highlighted this process of change- The first theme centred on the participants' experience of living with anxiety. The second theme centred on the individual's utilization of available resources to cope with anxiety and how the nature and characteristics of these resources shifted from pre- to the post-intervention phase. The third theme (the evolved self) featured on the participants' perception of self as they completed the MBI program and learned to view the world through its lenses. This also emphasized the unique features of the therapy process and how it helped the participants to evolve through the process.

Conclusion: This study revealed that an Individually tailored MBI program had a positive effect on the participants. They reported that they were better able to handle their emotions and felt more in control of themselves now when they face challenging situations. There was enhanced sense of self-confidence and feeling of self-efficacy together with improvement in productivity.

Keywords: Anxiety, Mindfulness Based Intervention, Interpretative Phenomenological Analysis

3.5: Efficacy of third wave CBT approaches & way forward

231/T3.5/OP/113 Efficacy of Compassion Focused Therapy in individuals with Alcohol Dependence

Authors: Tenzin Dolma, Dr. Amool Ranjan Singh

Contact: zinten_dolma@yahoo.com

Country: India

Abstract: Aim: The misuse of alcohol, due to its ability to provide momentary pleasure or reprieve, and in turn its' unhealthy repercussion on our mental and physical health has been well studied and established. Compassion Focused Therapy (CFT) is a relatively novel therapeutic approach which has successfully proven its efficacy in reducing self-criticism, emotional dysregulation and improving self-compassion, all of which have been implicated in many studies as factors underlying alcohol use. The aim of the study is to see the efficacy of CFT as an intervention in individuals diagnosed with alcohol dependence. Method: The study uses pre-post test design in which a sample of 5 individuals diagnosed with alcohol dependence from the In-Patient Department of Ranchi Institute of Neuropsychiatry and Allied Sciences, Ranchi were selected purposively. Post 2 weeks of detoxification, a baseline assessment was done, consisting of the following tests; Self Compassion Scale Short-Form; The form of Self-Criticizing/Attacking & Self Reassuring Scale; Brief Experiential Avoidance Questionnaire; Difficulties in emotion Regulation Scale-Hindi version and; Depression Anxiety and Stress Scale. Then the patients will undergo a tailored 8 sessions of CFT spanning a period of 1 month, with techniques focusing on compassionate mind training and skills for tackling experiential

avoidance along with working with self-criticism and enhancing self-compassion, at the end of which a post-intervention assessment was conducted. A 3-month follow-up post discharge, is also planned. The data will undergo descriptive statistic and Kruskal Wallis Test to compare the pre, post and 3-month follow-up data using SPSS version 26. Result and Conclusion. In order to delineate the outcomes of the research data analysis is under process and thus the detailed results and conclusions will be discussed at the time of presentation.

Keywords: Compassion Focused Therapy, Alcohol Dependence, Compassion Focused Therapy, Alcohol dependence

3.12: Others

236/T3.12/OP/114: Extending Our Understanding of the Association between Symptoms of Emotional Disorders and Emotional Awareness, Beliefs about Emotions, and Emotional Control: A Network Analysis Approach

Authors: Razvan Predatu, Daniel David

Contact: razvan.predatu@gmail.com

Country: Romania

Abstract: Introduction: In the current study, we focused on investigating various emotion regulation processes, specifically emotional awareness, beliefs about emotions, and emotional control in relation to the experience of symptoms of emotional disorders (ED), using a network approach. Method: A number of 860 respondents (the ongoing data collection process aims to surpass a target of 1000 participants) participated in an online study examining these emotion regulation processes in relation to symptoms of depression and anxiety. Patient Health Questionnaire-9 (PHQ-9), Generalized Anxiety Disorder 7-item Scale (GAD-7), Beliefs about Emotions Scale (BAEs), and Difficulties in Emotion Regulation Scale Short Form (DERS-SF) were used in the current study to investigate these relations. Results: Data analysis is in progress. Specifically, the analyses regarding network estimation, stability (i.e., edges accuracy and centrality indices stability), visualization, and bridge analysis will be performed in RStudio. Discussion: Despite the incontestable advantages of the network approach, no study has employed this new paradigm to understand the interrelationships between ED symptoms and these emotion regulation processes. Conclusion:

The current study will offer novel information regarding which of the three core emotion regulation processes plays a more central role in relation to ED symptoms.

Keywords: emotional disorders, emotional awareness, beliefs about emotions, and emotion control

3.7: Role of CBT in stress management, lifestyle medicine & promoting wellness

244/T3.7/OP/116: Brief Cognitive Behavioural Intervention for managing Cognitive Distortion among college students

Authors: Mehr Akhtar, Smit Soni, Dr. Susmita Halder

Contact: mehrakhtar12@gmail.com

Country: India

Abstract: Cognitive distortions, which are negative or irrational thinking patterns, can significantly affect individuals by diminishing motivation, reducing self-esteem, and contributing to issues like anxiety, depression, and substance abuse. Regularly experiencing these patterns might result in psychological problems and may interfere with daily living functioning. College students often encounter cognitive distortions without being aware of them, highlighting the need to identify and manage these distortions.

A study involving 50 college students aimed to find out the presence of cognitive distortions among them and devise a brief cognitive behavioural intervention plan to address these distortions and their impact. The Cognitive Distortion Scale (CDS) by Briere, J. (2000) was utilized to assess their level of cognitive distortion, focusing on negative thinking patterns that disrupt optimal functioning. The scale evaluates five types of cognitive distortions: Self-Criticism, Self-Blame, Helplessness, Hopelessness, and Preoccupation with Danger. Following the assessment, a brief cognitive behavioural intervention package was implemented, leading to an improvement in the participants' thinking patterns, as evidenced by post-assessment results.

Keywords: Cognitive Distortion, College Students, Cognitive Behavioural Interventions, cognitive distortion- Self- Criticism, Self- Blame, Helplessness, Hopelessness and Preoccupation with Danger

3.7: Role of CBT in stress management, lifestyle medicine & promoting wellness

246/T3.7/OP/117: Implications of Spiritually Oriented Cognitive Behavioral Intervention to enhance the Subjective Well-Being in Adults

Authors: Sabhya Tibrewal, Dr Susmita Halder, Dr Akash Kumar Mahato

Contact: sabhyatibrewal1702@gmail.com

Country: India

Abstract: Well-being is crucial to human existence, and it has often been conceptualized within the realm of physical, emotional, and psychological well-being. Spiritual well-being is also a crucial facet that asserts a sense of purpose, faith and meaning in individuals. In the pursuit of understanding this facet, the study aimed to understand the implications of Spiritually Oriented Cognitive Behavioural Therapy in enhancing the subjective well-being among adults. In the present study, spiritual well-being of 100 individuals was assessed using Spirituality Index of Well-Being between the age group 18- 55 years. 10 individuals were screened who experienced low spiritual well-being and spiritually oriented cognitive behavioral intervention was planned and tailored to their needs. The outcomes revealed a notable positive impact on subjective well-being following the intervention. This underlines the potential of incorporating spiritual dimensions into therapeutic approaches, by using techniques like redefining cognitive beliefs through spiritual beliefs, including religious rituals in homework assignments, showcasing promising results in enhancing overall well-being among adults.

Keywords: Spiritually Oriented Cognitive Behavioral Therapy, Spiritual Well-Being, Adults, Spiritual beliefs

3.10: Improving access to Mental Health services for Asian population

259/T3.10/OP/121: The Challenges of Practicing CBT Intervention as a part of Mental Health Services in Indonesia

Authors: Fitri Fausiah

Contact: fitriff@gmail.com

Country: Indonesia

Abstract: Aim and Methodology: It is a conceptual paper based on the author's reflection on practicing CBT intervention in different time frames: before, during, and after the COVID-19 pandemic. This paper aims to identify challenges in practicing CBT in Depok, a perimeter city of Jakarta. The author analyzed the client's psychotherapy records and personal reflections on the CBT intervention to achieve this paper's objective.

Summary and Result: Although CBT as an intervention helps many clients with different psychological problems, we found out that more clients were unable to complete the CBT sessions. The analyses showed that the client's financial condition was the most common cause of the challenge. It prevents them from having regular visits, thus increasing the risk of not completing the CBT sessions. The other challenge was the clients' limited ability to reflect and think logically, which may be related to our education system.

We also discovered that online counseling, which was very popular during the COVID-19 pandemic, had increased our client's commitment and enabled them to complete the therapeutic sessions. Unfortunately, online counseling is only accessible to younger generations or those with better technological literacy.

Conclusions: In conclusion, adapting the CBT in a developing country like Indonesia is challenging. Adapting the CBT to a shorter and simpler version is one of the suggestions to overcome the challenges. Other suggestions will also be discussed in this paper.

Keywords: CBT, mental health service, Indonesia

3.4: Advances in Culturally Adapted models of CBT

25/T3.4/OP/122: Influence of early childhood experiences on the current world views of Hijras

Authors: Rati Khurana, Nimisha Kumar

Contact: khurana.rati29@gmail.com

Country: India

Abstract: Introduction: Hijra is a commonly used word in India that describes transgenders, eunuchs, intersex, and gender-incongruent individuals. The distinctiveness of Hijras resides not only in their standing out from conventional societal norms but also in their historical recognition in Indian society. The existence of Hijras in Indian society dates to almost 4000 years in history. In the Mughal era, from the 16th to the 19th century, hijras held significant roles in the court and different facets of government. They were seen as having religious powers and were frequently approached for blessings, especially during rituals. On the contrary, in the

current times, they face discrimination, stigma and marginalisation from a young age leading to negative beliefs and attitudes towards themselves, others and the world.

Method: The current study aimed at exploring the childhood experiences, common difficult emotions, psychological issues and day-to-day experiences of Hijras in India. The connection between their childhood experiences and their views about themselves, others and the world was explored through semi-structured interviews. Data from 10 hijras residing in Delhi-NCR was collected and analysed through a qualitative approach.

Results: The study highlights that even though Hijras still have somewhat of a permitted and visible place in Indian society but they are not very well accepted or given any kind of right that they would otherwise get if they identified themselves as male or female. The majority of them expressed experiencing rejection and marginalisation from society which leads to self-doubt and feelings of despair, anxiety and shame. These negative feelings lead to a disconnection from their cultural and religious identities.

Conclusion: Early childhood experiences can have a significant impact in shaping the worldviews of hijras. It is important for society to recognise them and build a supportive environment which could further help them develop positive self-image and healthy relationships.

Keywords: Hijra, childhood experiences, world-views, shame, stigma, acceptance

3.1: Current trends & challenges in high-tech, digital & AI based CBT interventions

280/T3.12/OP/129: Technology-Assisted Cognitive Behavioural Therapy for Suicide Prevention: A Systematic Review

Authors: Aysha Rifna A.M, Sayyiead Muhammed Farhan PM

Contact: aysha291096@gmail.com

Country: India

Abstract: Suicide is a global public health concern as suicide is the 10th-leading cause of death. Reluctance or inability to access in person face to face help suggests that technology assisted delivery may be a valuable resource for suicidal people. This research paper investigates the integration of technology-assisted Cognitive Behavioural Therapy (CBT) as a novel and impactful approach to suicide prevention. In light of the rising global rates of suicide, innovative strategies are essential to enhance accessibility and efficacy of therapeutic interventions.

This study aims provides a comprehensive review of literature, by systematically examining the publication trends and research trajectories in this field using performance analysis and science mapping techniques and synthesizing evidence on the effectiveness of technology-assisted CBT in preventing suicidal ideation and behaviours.

A systematic database search was conducted to identify CBT intervention studies for suicide incorporating key terms related to technology assisted intervention, cognitive behavioural therapy and suicide prevention. The Scopus database was the primary source, from which 122 studies were selected for bibliometric analysis to determine the temporal evolution, most productive journals, top authors, most productive countries, and co-citation in the available

scientific literature concerning technology assisted cognitive behavioural therapy in suicide prevention.

This study provides a detailed and insightful exploration of the current research landscape concerning the use of technology assisted cognitive behavioural therapy in suicide prevention. It highlights key areas of research, pivotal themes, and potential directions for future investigation. These findings are invaluable for shaping subsequent research and developing intervention strategies in this evolving field.

Keywords: technology-assisted intervention, cognitive behavioural therapy, suicide prevention

3.5: Efficacy of third wave CBT approaches & way forward

13/T3.5/OP/140: Enhancing Psychological and Cognitive Flexibility: A Manual-Based ACT Intervention for Generalized Anxiety Disorder (GAD)

Authors: Madhurima Dey Sarkar, Susmita Halder

Contact: madhurima711@yahoo.co.in

Country: India

Abstract: Introduction: Generalized Anxiety Disorder (GAD) is a pervasive condition that affects a considerable portion of the global population, significantly impinging on their quality of life and cognitive as well as executive functioning. The study explores Acceptance and Commitment Therapy (ACT), a prominent approach within the third wave of Cognitive Behavior therapy, which places emphasis on cultivating psychological flexibility. ACT is centered on the cultivation of psychological flexibility, empowering clients to develop adaptability in their psychological responses and lead a life guided by their deeply held values. Additionally, this study posits that individuals engaging in ACT may potentially experience not only psychological flexibility gains but also improvements in cognitive flexibility.

Objectives – The primary objective of this research is to explore the impact of a manual-based Acceptance and Commitment Therapy (ACT) intervention on individuals diagnosed with Generalized Anxiety Disorder (GAD). Specifically, the study seeks to elucidate the influence of this intervention on both psychological flexibility and cognitive enhancement.

Methods: In this research study, a group of nine participants underwent a 12-session Acceptance and Commitment Therapy (ACT) intervention. Psychological flexibility was measured using the Acceptance and Action Questionnaire, while cognitive adaptability was assessed through the Stroop Test and the Wisconsin Card Sorting Test. To track their progress, assessments were conducted at regular intervals of every four sessions, including both pretest and repeated posttest evaluations, aimed at observing alterations in psychological and cognitive flexibility.

Results: The findings indicate substantial improvement in both psychological and cognitive flexibility in clients upon completion of the 12-session Acceptance and Commitment Therapy (ACT) intervention. This suggests that ACT effectively targets not only psychological flexibility but also contributes to cognitive improvement.

Conclusion: This study thus underscores the effectiveness of Acceptance and Commitment Therapy (ACT) as a therapeutic framework, emphasizing its ability to align lives with values

and improve cognitive flexibility, offering potential for comprehensive GAD treatment and overall well-being.

Keywords: Acceptance & Commitment therapy; Generalised Anxiety Disorder; Psychological Flexibility; Cognitive Flexibility

POSTERS

3.7: Role of CBT in stress management, lifestyle medicine and promoting wellness

4/T3.7/P/2: Effects of an internet-based cognitive behavioural therapy (iCBT) intervention as a stress management strategy on improving depressive symptoms among nurses in Japan: A randomized controlled trial

Authors: Kazuto Kuribayashi

Contact: nanohanabatakefukainoko47@gmail.com

Country: Japan

Abstract: Background: Depression is a major health problem among nurses; hence, it is important to develop a primary prevention strategy to prevent depression among nurses.

Purpose: This randomized controlled trial aimed to investigate the effects of a newly developed Internet-based cognitive behavioral therapy (iCBT) program focusing on depressive symptoms at three- and six-month follow-ups, among nurses in Japan.

Method: The participants were recruited from 18 hospitals in Japan. The newly developed iCBT program for nurses consisted of six modules, which cover different components of CBT: transactional stress model, self-monitoring, behavioral activation, cognitive restructuring, relaxation skills, and problem-solving. Participants in the intervention group were asked to complete these modules within nine weeks and voluntarily submit their homework at the end of each module. Data were collected at three- and six-month follow ups. The outcome was depressive symptoms (BDI-II). A mixed model analysis was used to evaluate the intervention effect on an intention-to-treat principle.

Results: Nurses who met the inclusion criteria were randomized to either the intervention group or the control group (N = 105 for each group). At the three-month follow-up survey, 62 (59.0%) participants in the intervention group and 59 (56.2%) in the control group completed the survey. At the six-month follow-up survey, 53 (50.5%) participants in the intervention group and 52 (49.5%) in the control group completed the survey. The iCBT program failed to show a significant improvement in depressive symptoms at the three- and six-month follow-ups.

Conclusions: A serious limitation of this study was that the study could not fully verified the effectiveness of the iCBT program due to the small number of participants and high dropout rate. It is critical to improve the mode of content and homework delivery to enhance participants' involvement in program learning.

Keywords: Stress management, internet, nurse, depression

3.1: Current trends & challenges in high-tech, digital & AI based CBT interventions

12/T3.1/P/5: A pilot study of the efficacy of a digital therapeutics for ADHD children

Authors: Min-Sup Shin, Boong-Nyun Kim, Sejeong Lee, Chansol Park, Gi-Eun Nam

Contact: shinms@snu.ac.kr

Country: Republic of Korea

Abstract: Aim: Recently, CBT-based digital therapy has been developed and used for the treatment of various psychiatric disorders such as insomnia, depression, anxiety and panic disorders, alcohol/drug addiction, and ADHD. We conducted a randomized controlled, double-

blind study to examine the effectiveness of a digital therapeutics (named ‘Guardians DTx’) for ADHD children, which has been developed by Dragonfly GF Co., Ltd.

Methodology: Participants are 18 ADHD children aged 7-13 years who are visiting at the department of child-adolescent psychiatry, Seoul National University Children’s Hospital. They will be randomly assigned to the combined treatment (medication+digital therapy, n=9), or the medication only (n=9) groups. Digital therapy program will be conducted using tablet PC for 25 minutes a day, 5 days a week for 2 months. Before starting treatment, the permission will be obtained from the Institutional Review Board of Seoul National University Hospital. The Korean version of CPT for assessing inattention, impulsivity, and processing speed, and the Korean versions of neuropsychological tests to measure response inhibition, cognitive flexibility, attentional control, and working memory will be administered individually to ADHD children by clinical psychologists, and the Korean version of ADHD Rating Scale-5(K-ARS-5) will be administered to parents of ADHD children.

Results: We are currently recruiting ADHD children, and will provide digital therapy in mid-October after pre-treatment assessment. After post-assessment in early December, we will examine the effect of the digital therapy on neuropsychological functions of ADHD children, including attention, response inhibition, processing speed, cognitive flexibility to compare between the combined treatment (digital therapy + medication) and the medication only groups before and after the treatment. If the abstract of this study is accepted as a poster presentation, the results will be presented at the 8th Asian CBT Congress.

Keywords: Digital therapeutics, Guardians DTx, ADHD

3.1: Current trends & challenges in high-tech, digital & AI based CBT interventions

17/T3.1/P/6: Preliminary real-world outcomes of a cognitive behavioural therapy-based digital mobile mental health intervention: A retrospective single-group observational study

Authors: Amani Fadzlina Abdul Aziz, Tiffanie Ong Ru Yi

Contact: amanifadzlina@naluri.life

Country: Malaysia

Abstract: Aim and Methodology: Despite the rising promise of digital mental health interventions (DMHIs), outcomes from strictly controlled research trials have rarely translated into real-world effectiveness due to low participant engagement and retention. This study aims to retrospectively evaluate the preliminary real-world outcomes of a 4-part, self-paced, digital CBT-based mental health coaching programme (MHCP) delivered on the Naluri digital health platform. A quasi-experimental, observational design was used to retrospectively evaluate the real-world outcomes of 30 users who enrolled in Naluri’s MHCP and completed baseline and follow-up assessments. Outcomes were measured using the Depression, Anxiety, and Stress Scales (DASS-21) and app usage metrics. T-tests and linear regression were used to evaluate changes in mental health outcomes and assess the relationship between app activity and outcomes.

Summary of Results: Participants were mostly female (n=19), from Malaysia (n=28), with a median age of 30 (Mean= 30.72; SD=9.38). Participants took an average of 7 weeks (median=6) to complete the MHCP, and 25 participants (83.33%) completed 2 out of 3 key programme activities. From baseline to follow-up, participants reported a 7.79-point reduction

in depression ($p < 0.001$, $d = 0.99$), a 5.79-point reduction in anxiety ($p < 0.001$, $d = 0.87$), and a 6.69-point reduction in stress ($p < 0.001$, $d = 0.89$). Subgroup analyses on participants with mild or above symptoms at baseline showed that $n = 23$ (92.00%) improved in depression severity, $n = 18$ (85.71%) improved in anxiety severity, and $n = 14$ (77.78%) improved in stress severity. Retention for 2 to 3 weeks after starting the MHCP was significantly associated with improved depression scores at follow-up ($p < 0.05$). Ratings from a subsample of participants indicate acceptable levels of satisfaction for the MHCP.

Conclusions: Findings indicate promising programme efficacy and acceptable levels of programme engagement, retention, and satisfaction. Further investigation is needed to understand the relationship between engagement and outcomes for DMHIs employed in real-world settings.

Keywords: Digital mental health interventions; digital cognitive behavioural therapy; mHealth; real-world evidence; digital mental health

3.6: CBT & Neuroscience

30/T3.6/P/12: Efficacy of Neuromodulation Techniques in Conjunction with Cognitive–Behavioral Therapy to Treat Various Neuropsychological Magnitudes

Authors: Mithi Shukla

Contact: mithishukla963@gmail.com

Country: India

Abstract: Neuromodulation techniques and Cognitive Behavioral Therapy (CBT) have both been shown to be effective in the treatment of a variety of neuropsychiatric and psychological problems. The purpose of this review paper is to provide a complete overview of the use of neuromodulation techniques such as transcranial magnetic stimulation (TMS) and transcranial direct current stimulation (tDCS) in the treatment of various mental health issues in conjunction with CBT.

The paper begins by explaining the theoretical underpinnings of CBT and neuromodulation approaches, highlighting the neurobiological roots of mental problems and potential synergy between these modalities. It then looks into empirical evidence from clinical trials and studies, looking at the efficacy of combining neuromodulation with CBT for diseases such as depression, anxiety disorders, obsessive-compulsive disorder, and post-traumatic stress disorder.

Furthermore, the review covers the ways by which neuromodulation may improve CBT, such as neuroplasticity, emotional processing management, and cognitive process augmentation. It also investigates the safety, tolerability, and ethical implications of these integrated methods. The report also discusses the difficulties and constraints of combining neuromodulation and CBT, such as the need for tailored treatment plans, potential adverse effects, and the cost-effectiveness of such approaches. It continues by underlining the importance of more studies, such as large-scale clinical trials and long-term follow-up studies, to determine the ideal parameters for combining these therapy modalities. Finally, this review study highlights the potential of combining neuromodulation techniques with CBT as a promising option for enhancing treatment outcomes in people with mental health disorders. It lays the groundwork for clinicians, researchers, and policymakers to investigate and adopt these integrated approaches in clinical practice, thereby advancing the area of mental health therapy.

Keywords: Neuromodulation Techniques, Transcranial Direct Current Stimulation, Transcranial Magnetic Stimulation, Cognitive Behavioral Therapy, Mental Disorders, Mental Health

3.2: Role of CBT in Community Health and capacity building

31/T3.2/P/13: Literature review on strength literacy among nurses for practicing recovery-oriented cognitive therapy

Authors: Yuko Shiraishi, Yoshihiro Saito, Tsukasa Kuroki, Naoki Yoshinaga, Hiroki Tanoue, Yuta Hayashi.

Contact: y.shiraishi@rhs-u.ac.jp

Country: Japan

Abstract: Aim: We defined strength literacy among nurses as the skill of how nurses identify and utilize strengths as the basis for providing recovery-oriented cognitive therapy, and conducted a literature review to identify the concept of strengths for the development of the scale to assess the skill.

Methodology: We conducted a database search on Medical Journal, JMEDPlus, MEDLINE, and EMBASE (search period: January 2010–December 2021), using keywords “strength,” “nursing,” “resilience”, and “self-efficacy.”

Summary of Results: The database search identified 929 references, and six researchers conducted a screening. During the initial screening based on the title and abstracts, 696 references were excluded. Of the remaining 233 references, we excluded 222 references through a full-text screening, and included 78 references in our review. The initial items pool was selected by three researchers from a total of 14 articles, 13 of which were “articles deemed to be involved in strength literacy” and one article obtained through hand research. As a result, 41 codes were extracted that were deemed appropriate for the initial items pool, and finally, 26 items were extracted. The items that embodied strength literacy were extracted, such as “Collaboratively finding strengths in dialogue and action with the client” and “Focusing on the client's wishes in assessment.” We believe that these extracted items provide the basis for the development of strength literacy assessment scales.

Keywords: strength literacy; recovery-oriented cognitive therapy; assessment scale

3.6: CBT & Neuroscience

33/T3.6/P/14: The relationships between Event-related potentials and attention, executive functions

Authors: Taiki Kishigami, Miku Matsuyama, Siqing Guan, Hiroaki Kumano

Contact: t.kishigami2000@akane.waseda.jp

Country: Japan

Abstract: Purpose: Cognitive behavioral therapy relieves symptoms by enhancing attention and executive function (Sugiura, 2007). Event-related potential (ERP) are brain potentials that occur in response to specific events. This study considered whether ERP relate attentional and executive functions.

Methods: A total of 25 healthy university students in Japan (16 males, 9 females, mean age = 21.76; SD = 1.01) participated in this study. They answered the Executive Functions Questionnaire (EFQ; Sekiguchi and Yamada, 2017) for executive function, the Voluntary Attention Control Scale (VACS; Imai et al., 2015) for attention function, and the two subscales (Switching attention from reward and penalty) of the Japanese Version of Effortful Control Scale for Adults (EC; Yamagata et al., 2005) for attention function with reward. ERP(P3a at Fz, P3b at Pz, and MMN at Fz) for each participant were measured during the three-stimulus oddball task.

Results: P3a amplitude was negatively correlated with EFQ Efficacy ($r = -.500, p < .05$), P3b amplitude was positively correlated with VACS Selective Attention, VACS Switching Attention, and EC Switching attention from penalty ($r = .424, p < .05$; $r = .336, p < .10$; $r = .392, p < .05$) and MMN amplitude positively correlated with VACS Switching Attention and EC Switching attention from reward ($r = .407, p < .05$; $r = .338, p < .10$).

Conclusion: Our study suggests that ERP relate attention functions, closely related to CBT. In the future, the effectiveness of the intervention should be examined by focusing on ERP.

Keywords: Attention control, Executive function, Event-related potential, oddball task

3.1: Current trends & challenges in high-tech, digital & AI based CBT interventions

39/T3.1/P18: Feasibility study of an e-learning version of the “Journey of the Brave (JOB)” universal anxiety prevention program in Japan

Authors: Shoichi Ohashi, Yuko Urao, Kazumasa Fujiwara, Eiji Shimizu

Contact: u435936c@ecs.osaka-u.ac.jp.

Country: Japan

Abstract: Aim and Methodology: In Japan, a school-based anxiety prevention program called “Journey of the Brave (JOB)” has shown effects in reducing anxiety for elementary school children (Urao et al., 2018, 2021, 2022). This study aims to develop an e-learning version of JOB and evaluate its feasibility for future use in school settings. Forty-four parents and children participated, and children took the e-learning version of JOB at home. Parents and children responded to the questionnaire three times: pre-intervention (T1), post-intervention (T2), and three months after post-intervention (T3). We comprehensively evaluated the feasibility through dropout rates, program satisfaction, and changes in scores of psychological scales such as the Spence Children’s Anxiety Scale (SCAS).

Summary of Results: The dropout percentage was 23.8%, lower than similar preceding studies. Twenty-six children (81.3%) and 30 parents (93.8%) answered “I think so” or “I think so somewhat” to the question “Are you glad you took the program overall?” in a questionnaire at T3. Although a significant reduction was not demonstrated in children’s anxiety score (SCAS-C), the children’s anxiety score evaluated by parents (SCAS-P) showed a significant decrease between T1 and T3.

Conclusions: JOB’s e-learning version turned out to be feasible regarding dropout rates and program satisfaction. It is necessary to study intervention effects through controlled trials in the future.

Keywords: children’s anxiety, prevention program, e-learning, feasibility study

3.7: Role of CBT in stress management, lifestyle medicine & promoting wellness

40/T3.7/P/19. The cognitive behavioral program for anxiety “Journey of the Brave” for elementary school students -A pilot study on children’s and parents’ evaluation of the program-

Authors: Shiori Baba, Yuko Urao, Kazumasa Fujiwara, Eiji Shimizu

Contact: shiosalt.sb@gmail.com

Country: Japan

Abstract: Aim and Methodology: In Japan, a school-based prevention education program titled “Journey of the Brave” has been developed to prevent anxiety disorder (Urao et al., 2016). The effectiveness of the intervention has been confirmed in previous studies with the SCAS-C (Spence Children's Anxiety Scale-Child) as the primary outcome (Urao et al., 2018; 2021; 2022). In this study, we collected not only children's self-rated data (SCAS-C) but also parents' rated data (SCAS-P, SDQ) to examine the similarities or differences between self-rated and rated by others.

The sixth-grade elementary school children and their parents were designated as the intervention group, and the fifth-grade elementary school children and their parents as the control group. Children in the intervention group received the program in the classroom for a total of 10 sessions, while children in the control group received regular classes. Questionnaires were administered to the children and their parents three times: before the program (T1), after the program (T2), and three months after the end of the program (T3).

Summary of Results: Two-way mixed ANOVA for T1-T2 showed a significant decrease in the intervention group on the children’s self-assessment (SCAS-C). Parents’ ratings (SCAS-P, SDQ-TDS) showed no significant decrease. Also, for T1-T3, no significant decreases were shown between the two groups in either self- or parent-ratings.

Conclusions: The children's T1-T2 self-assessments indicated a partial program intervention effect. However, none of the parents' evaluations showed intervention effects. Since this study was a pilot study and was conducted with a small sample, similar studies with larger numbers of children are needed in the future.

Keywords: Anxiety; Children; Cognitive behavioral therapy; Japan; Prevention approach

3.1: Current trends & challenges in high-tech, digital & AI based CBT interventions

44/T3.1/P/19: Feasibility Study for Creating the Interactive VR Speech Task for Individuals with High Social Anxiety

Authors: Hoshino Madoka, Tomita Nozomi, Nanamori Mao, Yanagida Ayaka, Kumano Hiroaki

Contact: hoshinomadoka@akane.waseda.jp

Country: Japan

Abstract: Aim and Methodology: Virtual Reality (VR)-based interventions are effective for social anxiety disorder (Kim et al., 2020). In this study, we propose an experimental design of an interactive VR speech task and discuss its feasibility through a preliminary study. 2 participants conducted a VR speech task, an improved version of the interactive VR speech

simulation system developed based on Liao et al. (2018). The virtual space simulated a university lecture room with 22 avatars. The avatar interaction consists of positive, negative, and neutral animations, reflecting the results of participants' scanpath and fixation counts scores. The participants performed a 5-minute speech wearing HMD, and they answered state anxiety before and after the speech using a visual analogue scale. They also answered the degree of self-focused attention, a maintenance factor of social anxiety disorder, using the subscale of the Mental Perspective Scale (Tomita et al., 2018) and questionnaires about the sense of presence during VR speech, using Igroup Presence Questionnaire (Mehmet & Guven, 2021) at the end of the task.

Summary of Results: The mean score of participants' state anxiety before the VR speech task was 34, and the mean score after the speech was 74. The participants' scored 19.5 for self-focused attention, higher than the mean MPS subscale score of 16.54 in healthy university students (Tomita et al., 2018). The mean result of the sense of presence during the VR speech task was 0 point for General Presence, 1.1 points for Spatial Presence, -1.1 points for Involvement, and -0.4 points for Experienced Realism.

Conclusions: The VR task, reacting to eye movements towards avatars, heightened state anxiety and self-focused attention. It also provided a VR presence and immersion experience.

Keywords: Social anxiety, Virtual Reality Speech task, Interaction, Self-focused attention

3.3: CBT Interventions in Work Settings

49/T3.3/P/21: Research Trends in Factors Influencing Presenteeism and Absenteeism

Authors: Shunsuke Nagatsuka, Rui Hashimoto, Kazuki Oyama, Hironori Shimada

Contact: nagapoko.was@fuji.waseda.jp

Country: Japan

Abstract: **Aim and Methodology:** A number of studies have highlighted an array of factors that precede presenteeism, such as attending work despite health problems (Daniela & Wolfgang, 2019). Presenteeism has been associated with economic losses resulting from reduced labor productivity (Goetzel et al., 2004) and has been linked to mental health concerns (Conway et al., 2014). Therefore,

it is important to systematize our understanding of presenteeism and examine its underlying processes. However, it has been observed that, compared to absenteeism, which represents sickness-related absence, not enough consideration has been given to the factors and processes that drive presenteeism (Daniela & Wolfgang, 2019). The purpose of this article is to review the literature on presenteeism and absenteeism, and organize and compare the factors that influence these two phenomena.

For this analysis, we included articles in which the factors influencing presenteeism and absenteeism were examined. Papers that incorporated outcome measures such as productivity during presenteeism were excluded from the analysis as the purpose of the paper is to examine the factors that influence attendance behavior during states of poor health.

Results: While it has been suggested that presenteeism may be strongly influenced by cognitive factors such as stress and psychological distress compared to absenteeism, the specific indicators were not systematically organized. Furthermore, there is a limited number of studies

directly comparing presenteeism and absenteeism, and most of them were based on interindividual comparisons.

Conclusion: Future research should focus on the specific identification of individual cognitive variables and the processes through which individuals transition to presenteeism and absenteeism.

Keywords: Presenteeism, Absenteeism, Work

3.8: CBT interventions for special and marginalized populations

54/T3.8/P/25: Understanding Neuropsychiatric Symptoms and Their Relevant Context in Post-COVID-19 Condition: Implications for the Development of Cognitive-Behavior Therapy

Authors: Naoki Takamatsu, Masaki Kondo, Hiroyuki Chiba, Ikue Umemoto, Kei Noami, Masaya Ito, Shinsuke Kito, Hironori Kuga

Contact: naokitakamatsu@ncnp.go.jp

Country: Japan

Abstract: Aim and Methodology: In Japan, the high-context culture often conceals personal struggles, causing significant psychosocial impairment during the COVID-19 pandemic, particularly among post-COVID-19 condition (PCC) patients. This study explores unique challenges faced by Japanese individuals. Participants (aged 16 and older) with confirmed PCC from a national registry were recruited. 100 participants received a paper-based questionnaire, and one physician conducted a semi-structured 60-minute interview with 20 participants. Neuropsychological symptoms were thoroughly assessed and thematic analysis was performed using NVivo software. IRB approval and written consent from all participants were obtained.

Summary of Results: Between August and October 2023, 21 surveyed participants (median age: 42, IQR: 35-52, 71% female) revealed that 52% took leave, resigned, or had reduced income due to PCC, with <10% receiving financial aid. Depression, anxiety, and insomnia were common (71-86%), and 29% initiated psychiatric treatment after COVID-19 infection. Fatigue and brain fog were two most frequent and distressing symptoms reported (76%). Fatigue persisted a median duration of 10 months (IQR 6-12). Brain fog affected work, decision-making, and self-expression. Thirteen interviews unveiled two key themes. First, participants expressed anxiety regarding their future outlook, amplified by the lack of reliable information sources. Second, lack of understanding from family, workplaces, and healthcare providers was evident. Individuals practicing self-monitoring and pacing despite enduring symptoms tended to assess their distress more leniently, incorporating adaptive thinking.

Conclusions: This report marks the early findings in our ongoing study aimed at gaining a deeper understanding of PCC within the context of Japanese culture. Two central themes have emerged: the challenge of addressing uncertainties surrounding the prognosis of the illness and the widespread issue of insufficient understanding by others. These themes hold promise as potential targets for treatment. Furthermore, the observation of less negative effects seen in those with greater adaptability underscores the potential utility of CBT.

Keywords: COVID-19, CBT, Post-COVID-19 Condition, fatigue, brain fog, Japan

3.12: Others

64/T3.12/P/27: Implementation of Cognitive Behavior Therapy in Pakistan

Authors: Mirrat Gul Butt, Sadia Abid

Contact: Mirratgul@gmail.com

Country: Pakistan

Abstract: Cognitive Behavioral Therapy (CBT) has emerged as a pivotal approach in mental health care across the globe, including Pakistan. With a growing recognition of mental health challenges in the region, the implementation of CBT is crucial for bridging gaps in treatment accessibility and quality and a healthy lifestyle. Pakistan faces a significant burden of mental health disorders, compounded by stigma, limited resources, awareness and access to effective treatment. CBT, known for its evidence-based efficacy, offers a promising solution for addressing mental challenges. This poster presentation delves into the strategies, challenges, and impacts of implementing CBT in Pakistan and role of PACT in this regard. PACT started its work with cultural adaptation of Cognitive Behavior Therapy, with extensive research, developing self-help manuals in local language. The prime focus of PACT is the development of CBT services through research and training on national level, to foster the research and innovation in CBT techniques so mental health services can be expanded in all the underserved regions of Pakistan.

Keywords: CBT, implementation, PACT, evidence based efficacy

3.12: Others

68/T3.12/P/28: Effectiveness of a Single Session Rhythmic Intervention on Children in Selangor, Malaysia

Authors: Sindhu Nair, Firdaus Mukhtar, Ng Wing Hong & Wan Nor Najihah Ismail

Contact: sindhu@upm.edu.my

Country: Malaysia

Abstract: Introduction & Aim: Music has shown to have therapeutic benefits. The djembe, originally an African drum, has been used as part of the intervention and has shown to address many therapeutic needs (Bittman et. al., 2001; Ho et. al., 2011; Snow & D'Ámico, 2010; Tee et. al., 2021). However, research showing its evidence especially with children, is scarce. Therefore, the aim of this study was to investigate the therapeutic benefits of a single session rhythmic intervention on children.

Methodology: The participants consisted of six children between the ages of 8 and 13 years old who were referred for emotion regulation intervention. There were a mix of normally developing children and children with autism spectrum disorder. They were seeing a clinical psychologist and have learnt behavioural skills based on Cognitive Behaviour Therapy (CBT). The session was conducted for 1.5 hours by a clinical psychologist assisted by two clinical psychology trainees. Activities during the session include drum circle (group drumming), introduction to the instruments, learning the three basic djembe notes, rhythmic activities and a relaxation session. The children completed the Positive and Negative Affect Schedule for

Children (PANAS-C) scale and a feedback questionnaire that was adapted from Snow and DÁmico (2010).

Results: There was a significant increase in the positive affect scores pre and post session ($p < .01$). The children also reported that they liked the activities, playing with the instruments, they could make new friends and they would like to come back for more sessions. In addition, the session made them happier and they felt more energetic.

Conclusion: This study showed that the children did experience therapeutic effects of the rhythmic intervention as seen through the increase in their positive affect. Future studies can examine the long-term effects of this intervention and investigate the difference between normally developing children and children with autism spectrum disorder.

Keywords: rhythmic intervention, djembe, autism spectrum disorder, music, emotion regulation

3.6: CBT & Neuroscience

70/T3.6/P/29: How can people change? Neuroepigenetics, Neuroplasticity and CBT

Authors: Felice Elefant, Ellen Armour, Akanksha Bhatnagar, Christina Thomas, Aprem Zaya

Contact: fe22@drexel.edu

Country: USA

Abstract: Cognitive behavioral therapy (CBT) is an extremely successful evidence-based psychological treatment for complex neurological cognitive deficit disorders such as Autism and Alzheimer's disease. Unfortunately, how positive environmental changes like CBT are mechanistically translated into hard wired changes in our brains to enhance our cognition remains poorly understood. To this end, nucleocytoplasmic transport (NCT) in neurons is critical for enabling proteins to enter the nucleus and regulate cognition-linked genes in response to positive environmental enrichment (EE) cues such as CBT. Such experience-dependent (ED) EE neural plasticity is central for establishing memory formation and cognitive function and can influence the severity of cognition deficit disorders like Autism and Alzheimer's disease (AD). ED neural plasticity is driven by histone acetylation (HA) mediated neuroepigenetic mechanisms that regulate dynamic activity-dependent gene transcription profiles in response to neuronal stimulation. Yet, how histone acetyltransferases (HATs) respond to extracellular cues in the in vivo brain to drive HA-mediated activity-dependent gene control, thus mechanistically linking CBT with hard wired and long lasting positive changes in the brain, remains unclear. We previously demonstrated that extracellular stimulation of rat hippocampal neurons in vitro triggers Tip60 HAT nuclear import with concomitant synaptic gene induction. Here, we focus on investigating Tip60 HAT subcellular localization and NCT specifically in neuronal activity-dependent gene control by using the learning and memory mushroom body (MB) region of the *Drosophila* brain as a powerful in vivo cognitive model system. We used immunohistochemistry (IHC) to compare the subcellular localization of Tip60 HAT in the *Drosophila* brain under normal conditions and in response to stimulation of fly brain neurons in vivo either by genetically inducing potassium channels activation or by exposure to natural positive environmental enrichment (EE) ED conditions. Furthermore, we found that both inducible and ED cognition-mediated neural induction triggered Tip60 nuclear import with concomitant induction of previously identified Tip60 target genes and that Tip60 NCT was altered in our well-characterized *Drosophila* AD model. Mutagenesis of a putative

nuclear localization signal (NLS) sequence and nuclear export signal (NES) sequence that we identified in the *Drosophila* Tip60 protein revealed that both are functionally required for appropriate Tip60 subcellular localization. Our results support a model by which external positive reinforcement induces neuronal stimulation that triggers Tip60 NCT via its NLS and NES sequences to promote induction of activity-dependent neuroplasticity gene transcription and that this process may be disrupted in AD. To this end, we are currently developing first-in-class small molecule Tip60 HAT activators that should serve as powerful novel chemical entities to be used in conjunction with CBT practices to enhance cognition in cognitive deficit linked neurological disorders.

Keywords: CBT, neuroepigenetics, Alzheimer's disease (AD); Cognitive genes; Tip60 histone acetyltransferase (HAT), enriched environment

3.4: Advances in Culturally Adapted models of CBT

77/T3.4/P/32: Emphasis on the cultural dilemmas faced when using CBT for minorities and emerging models: A review

Authors: Aradhya Sharma

Contact: aaradn3012@gmail.com

Country: India

Abstract: Empirical evidence has targeted towards alleviating the symptoms of numerous psychological disorders by varied techniques of CBT. The present review aims to understand the different cultural dilemmas that can come up when dealing with patients belonging to minority communities.

Methodology: Studies were selected using search engines- JSTOR, PubMed. Various modalities of interventions under Cognitive Behaviour Therapy (CBT) which were targeted at the alleviation of symptoms and distress faced by individuals belonging to different minority communities.

Results: The awareness of different dilemmas and issues faced while dealing with patients belonging to minority community and how to deal with the same to provide effective therapy in the existing current cultural background of the patient. Emerging trend of use of rational emotive behaviour therapy, cognitive behaviour therapy was evident. DBT, Interpersonal therapy and mindfulness were among the newly discovered treatment modalities that require further direction.

Keywords: CBT, DBT, Interpersonal therapy, Cultural dilemmas, Minorities

3.5: Efficacy of third wave CBT approaches & way forward

78/T3.5/P/33: Relationship between Mind-Wandering Intentionality, Thought Content, and Pupil Diameter Change

Authors: Chinatsu Naganuma, Makoto Otake, Hirofumi Nishinaka, Hironori Shimada

Contact: chinakame0802@akane.waseda.jp

Country: Japan

Abstract: Aims and Methods: It has been suggested that the function of mind wandering depends on the intentionality as well as the content of thoughts. (Seli et al., 2016). Traditionally, mind wandering has been measured using subjective indices, but their limited validity necessitates the inclusion of physiological indices (Umeda and Otsuki, 2020). Pupil diameter reflects the function of the locus coeruleus, which controls concentration, and has been found to be associated with the occurrence of mind wandering (Konishi et al., 2017). However, the relationship between pupil diameter, intentionality, and thought content during mind wandering has not been fully investigated. Therefore, this study aimed to clarify the relationship between changes in pupil diameter, intentionality, and thought content during mind wandering. Fifteen university students (1 male, 14 females, mean age 21.4 ± 1.0 years) participated in the study. They completed the Sequential Sustained Attention to Response Task (Seli et al., 2016) to measure reaction time, the number of errors, and pupil diameter, and also took part in a thought-probing task. The local ethics committee approved the study (approval number: 2022-319).

Results: Pearson's correlation coefficient was calculated to examine the relationship between the intentionality of mind wandering, thought content, and the change in pupil diameter. The results revealed a moderate positive correlation between pupil diameter change and unintentional mind wandering ($r = .51, p = .052$), as well as a moderate positive correlation between pupil diameter change and thoughts about the past during mind wandering ($r = .47, p = .076$).

Conclusion: In mind wandering, the intentionality of mind wandering and the content of thoughts contribute to differences in the change in pupil diameter. Therefore, future studies should consider measuring pupil diameter in addition to subjective indices to better understand the function of mind wandering.

Keywords: Mind wandering, pupil diameter

3.3: CBT Interventions in Work Settings

92/T3.3/P/36: Effectiveness of a self-care intervention using the smartphone app to improve work performance for Japanese workers: a comparative study of mindfulness meditation and self-compassion meditation with a randomized controlled trial (RCT)

Authors: Takumu Kurosawa, Koichiro Adachi, Ryu Takizawa

Contact: takumu.kurosawa@gmail.com

Country: Japan

Abstract: Aim and Methodology: This study examined the effects of mindfulness and self-compassion self-care guided meditation with the smartphone app on improving work performance in a RCT.

The 271 participants (107 men, 163 women and 1 unknown with mean age \pm SD of 35.3 ± 9.2) who met the following criteria included: (1) currently working, (2) 18 to 54 years old, (3) Not on leave, (4) Not business owner or students, (5) Not currently diagnosed with a mental disorder and K6 score of fewer than 13 points. Work performance was measured using the Japanese version of the Stanford presenteeism scale (Koopman et al., 2002). Participants were randomly assigned to either a self-compassion group (SC; N=93), a mindfulness group (MM; N=90) or a wait-list control group (WLC; N=88); a crossover design was used where participants in the

WLC group were assigned to the SC or MM group after the waiting period. Participants in the intervention group engaged in meditation for 6-11 minutes once a day for 4 weeks using their smartphones. The study protocol was registered at University hospital Medical Information Network Clinical Trials Registry (ID: UMIN000049466).

Summary of Results: The analysis included 304 outcomes (SC=116; MM=113; WLC=75). Multiple regression analyses, controlling for the baseline values, showed significant differences between SC and WLC ($p = .012$) and between MM and WLC ($p = .036$), and no significant difference between SC and MM ($p = .633$).

Conclusions: The study showed that a one-month self-care intervention, using a smartphone app, was effective in improving work performance. Since the theoretical explanation for the present results remains unclear, future research should examine in detail the dissimilarities between the mechanisms of action of mindfulness and self-compassion practices.

(This study was funded by JP16H05653, JP19K03278, 22H01091, 22K18582 and AL150003.)

Keywords: self-compassion, mindfulness, self-care, work performance, occupational mental health

3.1: Current trends & challenges in high-tech, digital & AI based CBT interventions

93/T3.1/P/37: Effectiveness of Smartphone App-based Self-Compassion Intervention on Cognitive Emotion Regulation in Japanese Workers: A Randomized Controlled Trial

Authors: Mariko Shimoda, Koichiro Adachi, Takumu Kurosawa, Ryu Takizawa

Contact: mm.jasmine.17@gmail.com

Country: Japan

Abstract: Cognitive emotion regulation is classified into nine types (Garnefski, 2001), and is said to affect mental health depending on the strategy used (Koole, 2009). This study conducted a 4-week randomized controlled trial (RCT) of a self-compassion intervention using a smartphone app, focusing on Japanese workers. A total of 226 participants (84 male and 141 female, 35.5 ± 8.9 years old) were randomly assigned to either a 4-week app-based self-compassion group or a wait-list control group. All participants were administered The Japanese version of The Cognitive Emotion Regulation Questionnaire (Garnefski & Kraaij, 2007). A randomized control trial was conducted with a crossover design. The study protocol was registered at the University Hospital Medical Information Network Clinical Trials Registry (UMIN-CTR; ID: UMIN000049466). We conducted a multiple regression analysis to assess the effects of a self-compassion intervention on Cognitive emotion regulation. Age and sex were included in the analysis. The result shows a significant difference in 'Refocus on planning' ($\beta = -0.37$, $p = 0.02$). Our study shows that a 4-week app-based self-compassion intervention was found to significantly improve workers' refocusing on planning. Refocus on planning refers to thinking about what steps to take and how to handle the negative event (Garnefski, 2001). Further research is needed to explore the long-term effects of self-compassion interventions in a real workplace environment. (This study was funded by JP16H05653, JP19K03278, 22H01091, 22K18582, and AL150003.)

Keywords: Self-compassion, Cognitive emotion regulation, RCT, Smartphone App-based intervention, Workers' mental health

3.1: Current trends & challenges in high-tech, digital & AI based CBT interventions

94/T3.1/P/38: The effect of 4-week app-based mindfulness intervention on anger: A randomized controlled trial

Authors: Koichiro Adachi, Ryu Takizawa, Takumu Kurosawa

Contact: adachi-koichiro342@g.ecc.u-tokyo.ac.jp

Country: Japan

Abstract: Aim and Methodology: Mindfulness is the most commonly used treatment for anger (Richard et al., 2023). Although app-based mindfulness has received a lot of attention in recent years in terms of availability, there are few studies on the effects of app-based mindfulness on anger. Our study aims to show whether a 4-week app-based mindfulness intervention reduces anger.

A total of 166 workers (67 males and 99 females; 36.15±9.24 years old) in Japan were included in this study. Data was collected online from December 2022 to September 2023. The participants were randomly allocated to either a 4-week app-based mindfulness intervention or a wait-list control. Measures were administered before and after the intervention and waiting period. The Japanese version of the State-Trait Anger Expression Inventory-II (STAXI-II; Spielberger, 1999; Mine & Oki, 2001; Mine & Sato, 2005) was administered. A randomized control trial was conducted with a crossover design. The study protocol was approved by the ethics committee at the University of Tokyo (No. 23-28).

Summary of Results: The mean ± SD of post-trial trait anger was 18.65 ± 5.66 for the intervention group and 20.16 ± 6.55 for the control group. Using multiple regression analysis, participants in the intervention group demonstrated significant reductions in trait anger ($p=0.04$) compared to the control group after controlling for the baseline trait anger value.

Discussion: This study suggested the app-based mindfulness intervention had beneficial effects on anger, even in 4 weeks. These results are consistent with findings regarding in-person mindfulness intervention (e.g. Amutio et al., 2015). Further, we should explore how app-based mindfulness intervention reduces anger by a combination of psychological and physiological indicators. (This study was funded by JP16H05653, JP19K03278, 22H01091, 22K18582, and AL150003.)

Keywords: mindfulness, meditation, trait anger, digital intervention; smartphone app, worker

3.1: Current trends & challenges in high-tech, digital & AI based CBT interventions

98/T3.1/P/40: Examining Internet-delivered Parent-Child Interaction Therapy (I-PCIT) for the Father and His Child with Autism Spectrum Disorder in Japan

Authors: Yumi Kaneyama, Miyuki Sato, Hiroshi Sato

Contact: kaneyama@hoku-iryu-u.ac.jp

Country: Japan

Abstract: Introduction: Parent-Child Interaction Therapy (PCIT) is an evidence-based behavioral parent training program (McNeil & Humberg-Kigin, 2010). PCIT includes in vivo

feedback, referred to as “coaching” (Shanley & Niec, 2010). Parents are coached in two sets of skills (McNeil & Humber-Kigin, 2010). The first phase of PCIT is called Child-Directed Interaction (CDI). In the CDI phase, coaching is conducted to increase parental skill in the use of reflections, child-focused descriptions, and genuine, specific praises and decrease their use of questions, commands, and criticisms (Barnett et al., 2014). The second phase of PCIT is called Parent-Directed Interaction (PDI).

Despite the spread of Internet-delivered parent-child interaction therapy (I-PCIT), their application for children with autism spectrum disorder (ASD) and the concerned single-parent households are limited. This study aimed to investigate the efficacy of I-PCIT for the single-parent households having a child with ASD in Japan.

Methods: Participants were a Japanese father and his 5-year-old child with ASD and disruptive behavior in the single-parent households setting. The therapist was a clinical psychologist who joined a PCIT initial workshop and was provided supervision by a licensed clinical psychologist. I-PCIT used the videoconferencing platform to enable therapists to give therapy to the participants in their house remotely. The intervention was conducted 25 times over 8 months.

Results & Discussion: The results indicated that I-PCIT increased the father’s parenting skills, which improved the child’s disruptive behavior, social responsiveness and the father’s parenting stress. In addition, the father reported the benefits and in vivo validity of I-PCIT. These findings imply that I-PCIT is effective for children with ASD and their lone-parent households.

Keywords: PCIT, internet-delivered therapy, single-parent households, father, autism spectrum disorder

3.1: Current trends & challenges in high-tech, digital & AI based CBT interventions

103/T3.1/P/44 A study protocol for effective evaluations of mental healthcare services on primary outcome measures in subthreshold depression, subthreshold anxiety, and premenstrual syndrome

Authors: Aiko Eto, Numata, Noriko Tomoko Kawasaki, Tokiko Yoshida, Masaki Tamura, Kayoko Taguchi, Eiji Shimizu

Contact: 21fd0129@student.gs.chiba-u.jp

Country: Japan

Abstract: Objective: In recent years, mental healthcare services based on digital technology have been spreading rapidly in the fields of mental health and gynecology. Establishing effective evaluation methods for healthcare services using digital technology is necessary. To address this issue, it is essential to : 1. Calculate the Minimally Important Difference (MID) for electronic Patient Reported Outcome (ePRO) measures, which can determine whether clinically meaningful improvements have been achieved through web-based healthcare service interventions for subthreshold depression, subthreshold anxiety, and Premenstrual Syndrome (PMS). Furthermore, 2. Validate the effectiveness of healthcare services that meet the verified MID for ePRO measures through randomized controlled trials. To prepare for the execution of tasks 1) and 2) mentioned above, we will commence by conducting an incidence survey to

assess the incidence of subthreshold depression, subthreshold anxiety, and PMS. Then, we will assess the viability of a single-group intervention.

Methods: First, individuals aged 18-65 who are registered with an Internet research company will be asked to complete disease-specific questionnaires to assess the incidence of subthreshold depression, subthreshold anxiety, and PMS. Additionally, among the respondents to the questionnaires, healthcare interventions will be offered to a total of 200 people including 50 with subthreshold depression, 50 with subthreshold anxiety, 50 with comorbid condition of subthreshold depression and anxiety, and 50 with PMS. The inclusion criteria for PMS are women aged 18 to 45.

The primary outcome will be assessed using PHQ-9 for depression, GAD-7 for anxiety, and the Premenstrual Dysphoric Disorder (PMDD) evaluation scale for PMS. We will compare the values at the start of the intervention and at the end of the 4-week intervention to verify improvement rates, dropout rates, safety, and feasibility.

The findings of this study will contribute to the provision of evidence-based mental healthcare services for the first time in Japan.

Keywords: electronic Patient Reported Outcome(ePRO), subthreshold depression, subthreshold anxiety, Premenstrual Syndrome(PMS), healthcare, digital technology

3.10: Improving access to Mental Health services for Asian population

106/T3.10/P/46: Effectiveness of Online Parent Training for Vietnamese Parents of Children with Autism Spectrum Disorders

Authors: Masahiko Inoue, Honami Yamaguchi, Nakatani, Ayano Nishimoto, Kei Namiki, Satori Kuroda

Contact: masahiko.inoue.pc@gmail.com

Country: Japan

Abstract: In recent years, online parent training (PT) programs for neurodevelopmental disorders, such as autism spectrum disorder (ASD), have been implemented. In Southeast Asia, the diffusion of rehabilitation programs for children with ASD and that of PT as a parental support measure has been slow. This study evaluated the effectiveness of an online PT program developed in Japan and delivered remotely for Vietnamese parents of children with ASD living in Vietnam. Seven sessions of an online version of the Tottori University-style PT were conducted with 16 Vietnamese parents of children with ASD, enrolled via the Vietnam Autism Network. The online PT was conducted in real time from Japan, considering the two-hour time difference between countries. Lectures and exercises were presented in Vietnamese using PowerPoint materials, and the Japanese staff provided explanations in Japanese that were simultaneously translated by a Vietnamese interpreter. Attendance rates, homework assignment completion rates, and the number of statements on Zoom and social networking service (SNS) were calculated. A pre-post-test design was used to measure changes in parents' mental health factors and children's behavior, and a post-intervention questionnaire was used to analyze participants' acceptability of the PT. The results showed high attendance and task completion rates. Significant improvements in the mental health scores of the parents after the online PT (vs. before) was found, whereas improvements in children's behaviors was not statistically significant. High level of satisfaction with the cross-country online PT was

confirmed. This study configures a first step toward the dissemination/evaluation of Internet-based, cross-country PT for parental support in Asia.

Keywords: parent, autism spectrum disorder, neurodevelopmental disorders, Internet-based intervention

3.5: Efficacy of third wave CBT approaches & way forward

118/T3.5/P/52: The effect of online mindfulness intervention on self-esteem: A randomized controlled trial

Authors: Kohki Kaji, Koichiro Adachi, Ryu Takizawa

Contact: tomatomato2000@g.ecc.u-tokyo.ac.jp

Country: Japan

Abstract: Aim and Methodology: Randal et al. (2015) proposed intervention studies that aimed to improve self-esteem following mindfulness is lack of randomly allocated control groups. Furthermore, there have been few detailed investigations that identified the specific impact of mindfulness on change in self-esteem with online mindfulness intervention although several research demonstrated in the laboratory were reported. The aim of our study is to show whether a 12-week online mindfulness intervention improves self-esteem.

118 university students (58 men and 60 women; 21.3 ± 3.4) in Japan were included in this study. Data was collected online from June in 2021 to January in 2022. The participants were randomly allocated to either a 12-week online mindfulness intervention or a wait-list control. Measures were administered before and after the intervention and waiting period. A Japanese version of the Rosenberg Self-Esteem Scale (Rosenberg, 1965; Mimura & Griffiths, 2007) was administered. A randomized control trial was conducted with a crossover design. The study protocol was approved by the ethics committee at the University of Tokyo (No. 21-18).

Summary of Results: Using multiple regression analysis, participants in the intervention group demonstrated a significant increase in self-esteem ($p < 0.001$) compared to the wait-list control group after controlling for the baseline self-esteem value. Participants in the intervention group remained a significant increase in self-esteem ($p < 0.001$) compared to the wait-list control group, even after controlling for the baseline values, age and sex.

Discussion: This study suggested the online mindfulness intervention had beneficial effects on self-esteem. This finding is consistent with that of previous studies (Randal et al., 2015). Further, we should explore how online mindfulness intervention increases self-esteem by a combination of psychological and physiological indicators. (This study was funded by JP16H05653, JP19K03278, 22H01091, 22K18582 and AL150003.)

Keywords: mindfulness, meditation, self-esteem, online intervention

3.12: Others

134/T3.12/P/55: From Challenges To Strength: Worth Of Cognitive Visual Thinking And CBT For Children With Autism

Authors: Arunita Chakraborty, Susmita Halder

Contact: arunitachakraborty96@gmail.com

Country: India

Abstract: Introduction: Children with autism spectrum disorders are thought to have distinct depiction of cognitive strengths and weaknesses difficulties realizing others' thoughts and feelings, problems synchronizing and controlling their behavior, and an extraordinary ability to perceive details combined with an aptitude for detecting parts of objects or small details children with autism are visual thinkers.

Aim: The current study aims to study the cognitive strength of visual thinking among the children with autism and the application of cognitive strategies to turn there challenges into their strength.

Methods: The study includes children coming to the resource room that is aided by the government of West Bengal under the Sarva Sikshya Abhiyan specially for the children with special needs.It was a short-term problem focused approach.

Techniques Used: The intervention included taking a detail history of the child.A detailed history explains all aspects of an individuals life as it is the paving stone of a standardized diagnosis the children were given therapies and supports that used visual strategies since it often works well for autistic children.The parents were suggested to put visual reminders around their house with the help of pictures.They were suggested to take photos of the different play activities child can do, and put them on an 'activity board' as a reminder to help them make a choice also by taking photos of different steps involved in daily activities, like packing school bag and sticking the sequence on a wall near and by using visual supports for daily activities.Visual supports were used as tools that present information using symbols, photographs, written words and objects in the therapy sessions along with cognitive behaviour therapy to help the children change how they think about a situation also changing the way they react to a situation.

Results and Discussion: Results indicated a significant effect of cognitive strategies on the visual thinking capacity of the children, it improved with the application of the techniques such as visual reminders,visual supports and cognitive behavior therapy.The parents were taught a variety of coping skills to help their child manage difficult situations and turning those into strengths.

Keywords: CBT, Special needs, Cognitive strategies

3.5: Efficacy of third wave CBT approaches & way forward

136/T3.5/P/57: Compassion Focused Therapy for a Middle-Aged Male with Alcohol Dependence: A case study

Authors: Tenzin Dolma, Amool Ranjan Singh

Contact: zinten_dolma@yahoo.com

Country: India

Abstract: Aim: Compassion Focused Therapy (CFT) is a relatively novel therapeutic approach which has successfully proven its efficacy in reducing self-criticism, emotional dysregulation and improving self compassion, all of which have been implicated in many studies as factors underlying alcohol use. The aim of the study is to present a case study for purview to see the efficacy of CFT for an individual diagnosed with alcohol dependence. Method: A 31 year old

male individual in the In-Patient Department of Ranchi Institute of Neuropsychiatry and Allied Sciences, Ranchi after a detailed case history session, underwent a 2 week detoxification and then a baseline assessment was done consisting of the following tests; Self Compassion Scale Short-Form; The form of Self-Criticising/Attacking & Self Reassuring Scale; Brief Experiential Avoidance Questionnaire; Difficulties in emotion Regulation Scale-Hindi version and; Depression Anxiety and Stress Scale. Then the patient underwent a tailored 8 sessions of CFT spanning a period of 1 month, with techniques focusing on compassionate mind training and skills for tackling experiential avoidance along with working with self-criticism and enhancing self compassion, at the end of which a post-intervention assessment was conducted. A 3-month and 6-month follow-up post discharge, was also planned. Result and Conclusion. The post assessment scores showed improvement of almost at least 25% on the variables assessed. But the 3-month and the 6-month follow-up are yet to be done, and thus the detailed conclusion and clinical significance will be discussed at the time of presentation.

Keywords: Compassion Focused Therapy, Alcohol Dependence, Case Study

3.12: Others

148/T3.12/P/61: A Systematic Review of Literature on Cognitive Behavioral Therapy (CBT) in the Context of Emotional Education in School Settings

Authors: Dr. Chinu Agrawal, Preeti Somani, Sri Abinaya Balasubramanian

Contact: feelingminds@gmail.com

Country: India

Abstract: Cognitive Behavioral Therapy (CBT) holds value as an educational modality for emotional regulation and resilience-building, extending its utility beyond the context of individuals diagnosed with mental illness. Given the multitude of social and academic hurdles school-age children encounter, the development of problem-solving and coping strategies is of paramount significance to them. This study explores the significance of implementing CBT as an educative approach in schools to promote students' emotional well-being by teaching them to deal with their emotional upsets and become emotionally resilient. The systematic review encompasses an exhaustive exploration of academic databases, culminating in the identification of articles meeting stringent inclusion criteria. These criteria pertain to the integration of CBT-based approaches within the school environment. Subsequently, a rigorous evaluation of the selected studies' methodological rigor and findings is undertaken, followed by a meticulous thematic analysis aimed at uncovering prevalent patterns and trends within the literature. Findings from this review will provide valuable insights into the potential benefits of CBT in promoting emotional well-being and enhancing socio-emotional skills among students, thereby contributing to a holistic approach to emotional education. The analysis will also offer recommendations for future studies, policy development, and practical applications of CBT within the educational landscape.

Keywords: Cognitive Behavioral Therapy, emotional education, school settings.

3.10: Improving access to Mental Health services for Asian population

168/T3.10/P/65 Mental health program for community awareness among slum children in Bangladesh

Authors: Kamrun Nahar Khan

Contact: pinny.knkhan@gmail.com

Country: Bangladesh

Abstract: Individuals with a lower socioeconomic status in Bangladesh typically seek out traditional healers or religious leaders for mental health care (Jahan et al., 2015; Singh et al., 2022) and recent study delves into that there have extensive stigma on mental health in Bangladesh and suggested to increase public awareness on it. Hello Mind is a mental health team who addressed this issue and designed an awareness program for lower socioeconomic children. Through scheduled sessions, the program intended to educate children and their parents living in slums. This program highlighted the significance of mental health care and what to do if someone is experiencing mental health problems. Purposefully, the team selected a slum area school in Dhaka city and took 5-6 interviews among school teacher and student to design the program content. Prior to the program, the participants did not know about mental health. Typically, this program designed on 10 awareness sessions consisted of interactive lecture, sharing personal experiences, a demonstration, applying relaxation and time management techniques etc which followed the mixed method design. From April to May 2023, Hello Mind conducted “Amar Moner Jotno” (Taking Care of my Mind) program with 143 students from slum areas in Dhaka. Boys and girls from class 4 to 9 participated in this kind of mental health program for the first time. First session was focused on scientific facts on mental health, sign and symptoms of mental distresses, myths and stigmas and self-care. The second session centered on scientific facts relating to puberty and breathing exercise techniques. In the third session, they discussed their daily life activities and managing strategies and how to organize a quality daily plan. Additionally, mindfulness relaxation techniques were demonstrated and instructed to practice. Semi structured interview was taken to assess the outcome of this program. Children were now able to recognize mental health distress symptoms and challenges, when and where to seek mental health support, such as from a psychologist or psychiatrist, as well as the appropriate response and referral. Previously, the participants believed that suicide was a curse, but they now recognize it as a mental health concern. This program also assists them to understand that children also experience mental health issues and how it is closely related to physical health, personal life, and academic performance. The initial plan was to conduct awareness sessions and a few more sessions on life skills to improve mental health conditions. Due to the trainers’ and school’s overlapping obligations and commitments, total 6 session conduction was possible and the activities were delayed. Besides, the crowded space, lack of funds, absence of a sound system and multimedia options further prevented a more effective programmer. However, this session's format is adaptable to various demographics, including educators, parents, and business professionals. Other community workers or mental health professionals may utilize the training materials as well.

Keywords: Community mental health , slum children

3.7: Role of CBT in stress management, lifestyle medicine & promoting wellness

189/T3.7/P/69: Regulating the mediating factors of perceive stress in female adult: Application of Cognitive Behavioural Approach.

Authors: Dew Dutta, Preethul Saha, Susmita Haldar

Contact: dewdutta06@gmail.com

Country: India

Abstract: Stress can be defined as a state of worry or mental tension caused by a difficult situation. It is a human response that prompts us to address challenges and threats in our lives. Stress symptoms in women can manifest as both physical and psychological problems, including anxiety, sleep disturbances, and changes in menstrual patterns. Stress in women is experienced differently than in men due to a combination of biological, psychological and social-cultural factors. Hormonal fluctuations, social and cultural roles and biological vulnerability can influence these responses. A study was conducted to see the relationship between social intelligence and perceived stress on both genders, measured using Social Intelligence Scale (SIS) and Perceived Stress Scale (PSS); where significant number of females showed high level of perceived stress. Findings suggest that, individuals with high scores in these domains - Patience, Cooperativeness, Confidence, Sensitivity, Recognition of social environment, Tactfulness, and Sense of Humor of social intelligence are also showing higher perceived stress. Based on this finding, 10 female participants were interviewed and their cognitive errors were identified. A comprehensive cognitive behavioral intervention was planned to modify the mediating factors with the aim of reducing perceived stress.

Keywords: Perceived Stress, Social Intelligence, Cognitive Errors, Sensitivity

3.1: Current trends & challenges in high-tech, digital & AI based CBT interventions

205/T3.1/P/78: Personalization and Persuasive strategies in digital mental health applications for depression: A systematic review

Authors: Boyoung Kang, Hyunjin Kim, Juhee Choi, Eunbyeol Lee, Kee-Hong Choi

Contact: claire0433@korea.ac.kr

Country: Korea, South

Abstract: Introduction: Depression is a common disease worldwide. With the advance in technology, digital mental health applications and technologies for depression have been in the spotlight. However, there needs to be more personalization and in-situ support in digital mental health interventions as tailoring strategies can improve adherence and engagement with interventions delivered through apps. Personalization is one of persuasive strategies and using them can help ease the use and application of digital mental health interventions. Despite the necessity and importance of personalization in digital mental health interventions, there has been little systematic review of personalization strategies employed in depression intervention apps. This study aims to review existing mobile and web-based applications for depression along with personalizing and other features.

Method: We systematically searched in Google Scholar, PubMed, and PsycInfo using the following key words: “Depression,” “Application,” “Digital Therapeutics”, “Artificial

Intelligence (AI),” “Machine Learning (ML),” and “Personalization”. Four independent reviewers selected studies for inclusion and extracted and reviewed the data.

Results: Among fifty-four studies identified for personalization strategies operationalized in the depression intervention apps, thirty-five papers were included in this systematic review. nine of these twenty-nine applications supported the customization functions (i.e. explicit change manually made by the user such as avatar setting), allowing a self-tailored environment to match users’ personal preferences. All reviewed digital interventions for depression except one collected active data, and especially three utilized active and passive data from the users to personalize the digital interventions. Notably, we found that the ML model enhanced the sophistication of personalization by recognizing and predicting users’ emotional states (n=7), recommending practical activities (n=2), or directly providing various evidence-based interventions (n=4) to improve depressive symptoms. [Discussion] The current review suggests future development directions in personalization elements of digital mental health apps for depression based on our findings to improve the effectiveness and user engagement of these apps and foster future research.

Keywords: Depression, Digital Therapeutics, Application, Artificial Intelligence (AI), Machine Learning (ML), and Personalization

3.12: Others

220/T3.12/P/83: The role of response expectancy on the effectiveness of the counting blessings intervention: Can optimism moderated the effect?

Authors: Petronela Predatu, Daniel David, Irving Kirsch, Steven Jay Lynn, Stelian Florean, Răzvan Predatu

Contact: petronelablaga@psychology.ro

Country: Romania

Abstract: Introduction: This study addresses the existing knowledge gap related to the underlying mechanisms responsible for the efficacy of gratitude interventions. We focus on investigating the role of response expectancy within a RCT. We aim to examine how various types of response expectancy (positive, negative, and ambiguous) influence the "counting blessings" technique's impact on positive and negative emotions, and explore how optimism levels (high, medium, and low) interact with these expectancies.

Method: A total of 529 participants were randomly assigned to the Positive, Negative, or the Control Conditions. Among these participants, 142 completed the counting blessings intervention over seven consecutive days, and 111 participants completed a follow-up assessment a month later.

Results: While no significant interaction was found between experimental conditions and time regarding emotional outcomes, the moderation analysis revealed that optimism levels interacted differently with expectancies, influencing positive emotions. In the case of low optimism, pairwise comparisons indicated that positive emotions significantly increased from post-intervention to follow-up for individuals in the Positive Condition, and from pre-intervention to post-intervention for those in the case of Negative Condition. For participants with medium optimism, pairwise comparisons indicated that positive emotions increased from

pre-intervention to follow-up, as well as from post-intervention to follow-up, across all conditions. In the case of high optimism, pairwise comparisons indicated that positive emotions increased from pre-intervention to follow-up, as well as from post-intervention to follow-up, for those in the Positive and Control Conditions.

Conclusions: Our findings underscore the efficacy of a short gratitude journal for enhancing positive emotions, reducing negative emotions, and highlight the nuanced nature of response expectancy. The implications extend to both theoretical understanding and potential clinical applications.

Keywords: Response expectancy, Gratitude intervention, Positive Emotion, Negative Emotion, Optimism, RCT

3.10: Improving access to Mental Health services for Asian population

222/T3.10/P/84: Exploring the sexual functioning in women with common mental illness

Authors: Reshma Antony, Dr M. Manjula, Dr Geetha Desai

Contact: reshmaantony00@gmail.com

Country: India

Abstract: Sexual functioning is a commonly impaired domain in the psychiatric population. Women with mental illness face unique problems related to their sexual well-being due to factors such as internalized stigma, negative self-beliefs (Wright, et al., 2007), negative emotionality and sexual incompetence (Peitl, et al., 2010). The frequency of sexual dysfunction in women with various psychiatric disorders varies from 49.1% to 70% across countries. The specific emotional, relational and sexual needs of this population are different from that of the general population and have not been explored in depth. Despite its prevalence in this population, there is evidence that it is often overlooked by mental health professionals due to the lack of knowledge and experience in eliciting sexual problems from patients. The current study aims to explore the subjective, narrative experiences of women with common mental disorders, to understand the various personal, interpersonal, clinical, environmental, social and cultural factors facilitating and hindering sexual functioning. Participants were identified from the in-patient or out-patient departments of NIMHANS using a purposive sampling method. In-depth interviews were audio-recorded and analysed adhering to the Grounded theory method. The various categories that emerged will be discussed in the presentation.

Keywords: sexual functioning women common mental disorders

3.4: Advances in Culturally Adapted models of CBT

235/T3.4/P/90: Role of Culture-based Practice as Cognitive Behavior Therapy (CBT) in Depression: A Case Study

Authors: Seema Sharma, Rani Srivastava

Contact: seemcp01@gmail.com

Country: India

Abstract: Introduction: The UNESCO (United Nations Educational, Scientific and Cultural Organization) Universal Declaration on cultural diversity defines culture as ‘the set of distinctive spiritual, material, intellectual and emotional features of society or a social group, and that it encompasses, in addition to art and literature, lifestyles, ways of living together, value systems, traditions and beliefs.

Case description: Patient X is 38 years old, Hindu male, graduate, currently unemployed, married (2 years of marriage) but separated on mutual consent, HSES, and belongs to a nuclear family. The total duration of illness is 18 years. He was receiving treatment from different professionals but he could not achieve significant improvement and his life was unable to manage his activities of daily living. Method: The method was used in this case Guru-Chela Model for the treatment and pt. was stayed with his guru in aashrama for the treatment.

Results: The therapeutic intervention used in this case study, significantly improved his activity of daily living, coping style, emotional regulation, and positive attitude for the future and environment.

Conclusion: The efficacy of the culture-based model was established as it helped reduce the symptoms, and bring changes in coping and functionality.

Keywords: Culture-based model, Cognitive behaviour therapy, Depression

3.8: CBT interventions for special and marginalized populations

252/T3.8/P/97: Emotional regulation difficulties and Personality Traits among K-entertainment artists

Authors: Ye-Seul Kim, Heewon Seo, Sooyun Jung, Kee-Hong Choi

Contact: christinekys@naver.com

Country: South Korea

Abstract: While the popularity of K-pop culture is globally expanding, Korean entertainers and trainees experience depression and anxiety more frequently compared to the general population. They often report the lack of ability to effectively manage their emotions, heightened emotional sensitivity, and high stress levels. This study explored the relationship between emotional regulation difficulties and personality traits among Korean entertainers and trainees, and further investigated their emotional difficulties based on their debut status.

This study conducted self-report assessments on 272 trainees(n=214) and entertainers(n=58), using the validated Korean Multidimensional Personality Inventory (Bright and Dark Personality Inventory-Short Form; BDPI-SF), standardized Mental Health Screening Tools for Depressive Disorder (MHS:D), Anxiety Disorder (MHS:A), and Suicide risk (MHS:S); and content-validated items measuring difficulties in perceiving, accepting, and regulating emotions.

The results revealed that difficulty in emotional regulation was negatively correlated with extroversion ($r = -.238, p < .05$), emotional stability ($r = -.169, p < .05$) and positively correlated with all maladaptive personality traits (all $p < .05$). The comparison between entertainers and trainees revealed significant differences in anxiety and emotional difficulties. Entertainers reported significantly higher anxiety ($t = -2.495, p < .05$) and more difficulties in emotional regulation ($t = -2.320, p < .05$) compared to trainees. Moreover, entertainers exhibited higher negative affectivity ($t = -2.215, p < .05$) and lower extroversion ($t = 2.367, p < .05$) than trainees. Emotional regulation difficulties significantly influenced anxiety ($\beta = 0.747, p < .001$)

and showed a significant mediating effect through extroversion ($\beta = -0.158$, $p < .001$) (Sobel, $Z = -4.245$, $p < .001$).

In sum, it appears that extroversion might serve as buffer against emotional regulation difficulties and this study seems poised to aid in understanding both the strengths and weaknesses in artists' personality traits. Moreover, it highlights concerns about ongoing or exacerbated emotional regulation issues post-debut, indicating the necessity for early intervention regarding the mental health of trainees.

Keywords: K-entertainment artists, Emotional regulation difficulties, Personality Traits, Mental Health

3.5: Efficacy of third-wave CBT approaches & way forward

253/T3.5/P/98: Metacognitive Therapy for Worry in Generalized Anxiety Disorder

Authors: Stuti Sharma, Dr. Seema Sharma

Contact: stutisharma390@gmail.com

Country: India

Abstract: The aim of the present study was to investigate the efficacy of Metacognitive Therapy (MCT) in coping with chronic worry and metacognitive beliefs within the context of Generalized Anxiety Disorder (GAD), with a specific emphasis on “worry about worry” as a central focus of the therapeutic intervention. A sample of 20 participants (M=10, F=10) previously diagnosed with GAD participated in a structured intervention utilising metacognitive strategies. Participants anxiety levels were measured using Beck Anxiety Inventory (BAI), and worry severity was measured through the Penn State Worry Questionnaire (PSWQ) and Metacognitions Questionnaire. Following the MCT intervention, participants were re-evaluated one-month post-therapy to gauge the effectiveness of the treatment. The statistical analysis involved the use of paired-sample t-tests to assess pre- and post-intervention changes in anxiety and worry scores. Correlations between changes in metacognitive beliefs and symptom reduction were explored. Preliminary findings suggest a significant reduction in both general anxiety levels and worry severity, particularly in the domain of meta-worry. This outcome underscores the potential of MCT as an effective intervention for GAD.

Keywords: Metacognitive Therapy, Generalized Anxiety Disorder, Worry, Intervention

3.12: Others

265/T3.12/P/105: Small steps to miles: Exploring possibilities of CBT within religion to cater primary-level mental health issues

Authors: Tanu Kukreja, Rajesh Nair

Contact: dr.tanukukreja@gmail.com

Country: India

Abstract: Background: Religion serves as a guideline to the lifestyle of humans from all sectors of society. People believe in the sacredness, and divinity of religion and also worthy of

something above them. Religion incorporates values (Graham and Haidt, 2010) and people behave according to their value system. Through this article we look for the scientific evidence that incorporate religious issues into therapy and are proven to be successful.

Objective: Religious practices are close to people's heart and shape their everyday life. Therefore, we look for opportunities in CBT to inculcate religious issues and values to provide adaptable and individualized treatment.

Method: A systematic review of the high-quality scientific researches integration religion and CBT is conducted and expert advice is sought to validate the inferences.

Results: Though there is a paucity of scientific evidence to connect religious issues in the therapy. It also brings complications in terms of religious diversity and its adaptability. It is still understandable from the available results that therapy with religious issues is possible and achievable.

Conclusions: CBT has proven itself over time and ages to be at the center of psychology practice. It is high time that we integrate religious values and issues of people with the therapy to provide even more adaptive, efficient and comparatively faster treatment.

Keywords: CBT, Religion, Values

VIRTUAL PRESENTATIONS

3.4: Advances in Culturally Adapted models of CBT

290/T3.4/VP/2: Effects of Decreasing Self-Criticism and Increasing Self-Kindness on Body Image and Well-Being in Japanese Young Women: Decreasing Negatives vs. Increasing Positives

Authors: Eriko Takahashi, Takumi Takahashi, Ryotaro Fukuda, Taisuke Katsuragawa

Contact: e.takahashi@aoni.waseda.jp

Country: Japan **3.7:** Role of CBT in stress management, lifestyle medicine & promoting wellness

Abstract: Objectives: The aim of the current study was to identify the areas of body image and well-being that are affected by reducing negative attitudes towards the self, which is the basis of traditional cognitive-behavioral therapy. This study also examined whether adding a positive psychological approach to traditional cognitive-behavioral therapy enhances its effects on positive body image and well-being. The present study involved Japanese young women who are dissatisfied with their body image and hope to improve it through psychological intervention. They were randomly assigned to the following three groups: the first group participated in an intervention to decrease self-criticism regarding one's body (decreasing negatives group: N group), the second group participated in an intervention to both decrease self-criticism and increase self-kindness regarding one's body (decreasing negatives and increasing positives group: NP group), and the third group experienced no intervention (non-intervention group: NI group). The authors hypothesized that negative body image would decrease, positive body image would increase, and well-being would increase in the N and NP groups compared to the NI group.

Methods: The baseline consisted of 20, 20, and 21 participants in the N group, NP group, and NI group. Because some participants dropped out during the follow-up, the final sample consisted of the 14 in the NP group (mean age: 26.4, SD=4.1), 13 in the N group (mean age: 27.6, SD=5.0), and 15 in the NI group (mean age: 26.8, SD=4.1). A total of four experiments and a one-month-long online intervention was carried out. Before and after the experiment, self-compassion, body image, and well-being were assessed, along with one-month and three-month follow-ups.

Results: Our results suggested that negative body image and abnormal eating decreased in both intervention groups, but the reduction was more pronounced in the N group. Negative body image schemas also decreased in both intervention groups, with no significant difference. Positive body image also increased to the same extent in both intervention groups. The scores did not show any significant changes in the non-intervention group. The scores for well-being showed an increase in both intervention groups, but there was no significant change in the NI group.

Discussion: The findings of this study confirm that the interventions employed are effective at improving body image and enhancing well-being among normal-sized young Japanese women who are dissatisfied with their appearance and want to reduce their psychological distress.

Keywords: body image, body dissatisfaction, eating disorders, self-compassion, positive psychology

3.10: Improving access to Mental Health services for Asian population

292/T3.10/VP/3: A Profiling Study among Student Mental Health Literacy in University in Malaysia

Authors: Muhammad Nur Waafi Badrudin, Siti Raba'ah Hamzah, Firdaus Mamat, Siti Nur Syuhada Musa

Contact: waafibadrudin@gmail.com

Country: Malaysia

Abstract: Mental health literacy is a related concept that is increasingly perceived as an important measure of awareness and knowledge of mental health. Objectives: This study aimed to identify risk and protective factors for mental health literacy among university students to guide mental health prevention. Methods: A cross-sectional design was used to collect the data from 3036 students (18-25 years) from 20 public universities in Malaysia. The 33-item Mental Health Literacy Scale (YMHLs) was used. The key outcomes of interest were knowledge of mental health problems, erroneous beliefs/stereotypes, first aid skills and help-seeking behavior, social support, and spirituality. Data were collected through self-administered questionnaires. Data were computed using Statistical Package for Science Social. Analysis and interpretation were carried out using descriptive and Chi-square tests.

Results: A total of 67.8% of respondents were female, 32.2% were male, and the mean age was 21.3 years old. The student demonstrates a high level of knowledge of mental health problems (M=3.913, SD=0.428), a low level of erroneous beliefs/stereotypes (M=2.025, SD=0.800), and with moderate level of help-seeking behavior (M=3.140, SD=0.660), social support (M=2.937, SD=0.832), and spirituality (M=3.277, SD=0.698). Conclusions: There is a need for immediate improvement of university students on mental health literacy which suggests that programs and activities need to be developed such that students can seek help from valid resources if they need to have the appropriate information on mental health. Due to the limitations of this study, further research is warranted.

Keywords: mental health literacy, knowledge, stereotype, help-seeking behavior, social support, spirituality

3.3: CBT Interventions in Work Settings

294/T3.3/VP/5: Thriving Through Adversity: A Study on the Resilience of Working Cancer Survivors in Malaysia

Authors: Siti Nur Syuhada Musa, Siti Raba'ah Hamzah, Firdaus Mukhtar, Soaib Asimiran, Zulaiha Muda

Contact: sn.syuhadamusa27@gmail.com

Country: Malaysia

Abstract: Cancer diagnoses not only pose significant physical challenges but also bring about substantial disruptions to individuals' professional lives. This study explores the resilience levels among working cancer survivors in Malaysia, shedding light on their demographic characteristics and the factors influencing their ability to navigate the post-

diagnosis work environment. The research adopted a quantitative approach, engaging 270 cancer survivors from a general hospital in Kuala Lumpur. Utilizing the SPSS 25 version, data analysis was conducted employing the EmpRes instrument developed by Näswall et al. in 2019. The study aimed to understand the prevalence of resilience among working cancer survivors and its association with various demographic factors. Results revealed a relatively balanced gender distribution, with 51.5% female and 48.5% male participants. Work status varied, with 45.9% holding permanent positions, 20.4% engaged in temporary employment, 25.6% being self-employed, and 8.1% working part-time. Ethnicity distribution highlighted the majority as Malay (68.5%), followed by Chinese (22.6%) and Indian (8.9%). Resilience levels among the working cancer survivors were predominantly high, with 88.1% reporting elevated levels of resilience. Moderate resilience was observed in 10.7% of the participants, while only 1.1% reported low resilience. The findings suggest that a significant proportion of working cancer survivors in Malaysia exhibit remarkable resilience, potentially influencing their ability to cope with the dual challenges of cancer survivorship and maintaining employment. Understanding the demographics and resilience levels of working cancer survivors is crucial for tailoring supportive interventions and workplace policies to enhance their well-being and ensure sustained workforce participation. The study contributes valuable insights that can inform both healthcare and workplace strategies for effectively supporting this vulnerable yet resilient population.

Keywords: Resilience, Working Cancer survivors, Cancer

3.4: Advances in Culturally Adapted models of CBT

298/T3.4/VP/6: Acculturation Discrepancy Scale: Development, Factor analysis, Reliability, and Validity

Authors: Misa Sasaki, Chiharu Maeda, Tomu Ohtsuki, Taisuke Katsuragawa

Contact: w.m-0568@ruri.waseda.jp

Country: Japan

Abstract: Problem and Objective: The suicide rate among individuals of Korean descent in Japan has been identified as the highest among immigrant groups (Gilmour et al., 2019). One contributing factor to this phenomenon is believed to be acculturation discrepancies, which involve differences in the level of acculturation and adaptive strategies between parents and their children. Research suggests that these discrepancies can worsen psychological issues such as depression and substance abuse among children (Szapocznik & Kurtines, 1993). However, conventional research has mainly concentrated on creating acculturation discrepancy scales for immigrants from Western countries, neglecting to address the unique needs of youth of Korean descent, especially in regions with high suicide rates. Therefore, this study aims to develop a scale tailored to assess acculturation discrepancies among youth of Korean descent and examine its reliability and validity.

Methods: Two questionnaire surveys were conducted, targeting 319 participants. This group comprised 212 youth of Korean descent and 108 Japanese youth (mean age 21.78 ± 3.00 years, 149 men, 167 women, 3 did not respond). The surveys included the following measures: 1) Face items. 2) Acculturation Discrepancy scale. 3) The Patient Health Questionnaire-9 Japanese version (Muramatsu et al., 2018). 4) Generalized Anxiety Disorder-7 Japanese

version (Muramatsu et al., 2010). 5) Japanese version of the UCLA Loneliness Scale Version 3 (Masuda et al., 2012). 6) Japanese version of the Cognitive Fusion Questionnaire 7-item version (Shima et al., 2016). 7) Vancouver Index of Acculturation (Ryder et al., 2000). Hypotheses were formulated based on evaluation criteria derived from COSMIN's classification of measurement properties (Prinsen et al., 2018). The ethics committee on human research of Waseda University approved the study (Approval Number: 2023-007).

Results and Discussion: A 19-item, 2-factor scale was developed to measure acculturation gaps, comprising (1) a sense of belonging gap and (2) a values gap. The scale demonstrated moderate reliability and validity. Previous research suggested that acculturation discrepancies typically arise when children have a higher level of acculturation than their parents (Birman, 2006). However, the results of this study suggest that such discrepancies can also occur when children have low adaptation to Japan. Additionally, it was previously believed that the strategy to reduce acculturation discrepancies involved children adopting their parents' acculturation strategies and sense of belonging (Bacallao & Smokowski, 2007). Nonetheless, this study indicates that children may not adopt the same strategies as their parents. These findings prompt considerations of whether acculturation discrepancies and their association with psychological issues are valid intervention variables for future interventions.

Keywords: Acculturation discrepancy, Outcome measure development, Korean descent

3.7: Role of CBT in stress management, lifestyle medicine & promoting wellness

304/T3.7/VP/9: Examining the Interplay of Self-Talk frequency, Mindfulness, and Emotion Regulation Strategies in Reducing Perceived Stress among Indian College Student Population

Authors: Riju Rathore

Contact: riju.rr21@gmail.com

Country: India

Abstract: The internal narratives we create through self-talk can significantly impact our perception of stressors, often amplifying them beyond their reality. Cognitive Behavioural Therapy (CBT) leverages mindfulness as a core tool to equip individuals with emotion regulation strategies after experiencing stress. While existing research has demonstrated the effectiveness of stress management interventions tailored to individual mindfulness and emotional regulation skills, the role of self-talk in this interplay remains less explored. Thus, this study aims to bridge this gap by investigating how self-talk interacts with trait mindfulness and emotion regulation in reducing perceived stress among college students. By understanding this complex interplay, we hope to inform the development of more personalized and effective CBT interventions for stress management.

Objective: 1) To Identify significant relationships between trait mindfulness, self-talk styles, emotional regulation strategies, and perceived stress. 2) Explore potential moderating effects of specific self-talk styles on the relationship between mindfulness and emotional regulation in predicting perceived stress. 3) To generate recommendations for tailoring CBT interventions for stress management

Methods: A sample of 200 college students in Gandhinagar are selected through convenience sampling method. The paper-and-pencil measures: the Perceived Stress Scale (PSS-10), the

Mindful Attention Awareness Scale (MAAS), the Emotion Regulation Questionnaire (ERQ), and the Self-Talk Scale (STS) consists of 51 items. Data analysis is done in SPSS.

Expected Outcome: This study will provide insights into how mindfulness, emotional regulation strategies, and self-talk frequency interact to influence stress perception in young adults. These insights can guide the development of targeted CBT interventions that promote effective stress management. By identifying and addressing maladaptive coping mechanisms such as expressive suppression and negative self-talk (self-criticism, social assessment), we can help individuals reduce stress and cultivate more adaptive strategies like positive self-talk (self-reinforcement, self-management) and cognitive reappraisal. Moreover, understanding how these factors interact can help individuals actively increase their mindfulness levels, ultimately promoting well-being.

Keywords: perceived stress, mindfulness, reappraisal emotional regulation strategy, suppression emotional regulation strategy, Self-talk Styles

306/T3.7/VP/10: A Cognitive Behavior Approach To Address Daily Hassles Of Middle Aged Non-Clinical Population

Authors: Jyoti Thakar, Dr. Ritu Sharma

Contact: jyoti.thakar85@gmail.com

Country: India

Abstract: Everyday experiences of middle-aged individuals are a collection of various micro-events. These micro events encompass a wide array of experiences from mundane tasks to unexpected emergencies, including managing household chores and dealing with minor conflicts. These minor stressors often go unnoticed. However, when it accumulates, it impacts an individual's mood and overall well-being. Cognitive Behavioral Therapy is often used to address significant mental health concerns. This paper aims to explore the potential relevance of Cognitive behavioural therapy in mitigating daily hassles. A sample of 100 middle-aged adults were put into a focus group discussion-based cognitive behavioural approach. This research contributes to a deeper understanding of how CBT can be tailored to address various daily hassles of middle-aged adults. It will allow the organization to organizations can use it to promote a positive environment and individuals can also use it as a coping strategy to maintain equilibrium in life.

Keywords: Key Words: Daily Hassles, Daily Stressors, wellbeing, Cognitive Bheavioral Approach



ACBTA 2024 NEW DELHI SCIENTIFIC PROGRAM

TRACK 4

STANDARDS IN CBT PRACTICE, TRAINING, AND SUPERVISION

(2 MARCH 2024: DAY 4)



TRACK 4
STANDARDS IN CBT PRACTICE, TRAINING, AND
SUPERVISION
(2ND MARCH 2024: DAY 4)
OPEN SYMPOSIA

4.5: Current status and training models of CBT in Asia

191/T4.5/S/22: CBT training in India: Five decades of experience and reflections from the Behavioural Medicine Unit, NIMHANS

Authors: Paulomi M Sudhir, Manjula M., Ajay Kumar

Contact: paulomi.sudhir@gmail.com

Country: India

Abstract: Background: Since 1955, the Department of Clinical Psychology, NIMHANS, Bangalore has been offering a 2-year Postgraduate full-time program in clinical psychology, in a multidisciplinary team setting using the scientist–practitioner model. This is one of the oldest courses run in India. Clinical postings are an integral part of this model and include a 3-month posting in the behavioural medicine unit, a referral unit providing cognitive behaviour therapy. The symposium will trace the origins of the Behavioural Medicine Unit, since its establishment in 1974, its contributions to the training, supervision, and capacity building in the practice of cognitive behaviour therapy, keeping in mind some of the current issues and challenges in CBT training and practice in the country.

Presentation 1: *Tracing the establishment of the Behavioural medicine unit and its role in CBT training* The Behavioural Medicine unit – previously known as the Behaviour Therapy and Biofeedback Unit was established in the mid-1970s at the Department of Clinical Psychology, National Institute of Mental Health and Neurosciences, Bangalore, India. Over five decades, the unit has systematically built clinical services, training, and research in keeping with international developments in the field of cognitive behavior therapies globally. This presentation will trace the developments within the unit highlighting some of the milestones research contributions and key contributions in areas such as mindfulness-based interventions and Behavioural Medicine as part of clinical service and training.

Presentation 2: *An overview of postgraduate training in CBT in a tertiary care setting* Since 1955, the Department of Clinical Psychology, NIMHANS, has been offering a 2-year Postgraduate full-time program in clinical psychology, in a multidisciplinary team setting using scientist–practitioner model. Training Postgraduates is a key strength of the unit and is the only one of its kind in the country. The unit has established itself with training in CBT for postgraduates and mental health professionals including psychiatrists, psychiatric social workers, and nurses, emphasizing ethical practice. The growth of the structure of clinical teaching, the strategies adopted in training, and its alignment with clinical services will be discussed in this presentation highlighting, challenges.

Presentation 3: *Clinical supervision and capacity-building in the practice of CBT in India* Clinical supervision is a key activity at the Behavioural Medicine unit and is an integral part of the post-graduate training and the clinical services that the unit has been providing for over

five decades. Being a referral unit in a premier tertiary mental health setting, the unit maintains high standards in providing clinical care which is closely related to supervision. Capacity building in CBT for various mental health professionals across the country is a significant activity the unit has been engaging in over several decades. The third presentation in the symposium will highlight the current practices and models of supervision in the behavioural medicine unit share some of the challenges in the process of supervision and highlight the contributions of the unit in capacity building including digital training and clinical courses, focusing on key concerns and challenges.

Keywords: NIMHANS, Behavioural Medicine Unit, CBT training, supervision

OPEN PRESENTATIONS

4.5: Current status and training models of CBT in Asia

19/T4.5/OP/7: An Empirical Study of the Experiences of Clinical Psychologists Practicing Marital Therapy in India

Authors: Kamna Chhibber, Anjali Midha Sharan

Contact: kamnac@gmail.com

Country: India

Abstract: Marriage is considered to be a significant milestone in the life of an individual residing in India. It is seen to be sacrosanct and is viewed as the primary source of intimacy, support and companionship. In the recent years, rates of divorce have been rising in the country and large numbers of couples reach therapists seeking intervention and support for their relationship related problems. Marital therapy is now an increasingly growing area of intervention for practicing therapists in India. In such a scenario developing a comprehensive understanding of the practice approaches when working with married couples in India is important as currently there is insufficient literature pertaining to the availability and applicability of both Western based and indigenously developed models of intervention. The current study involves an exploration of 83 practicing RCI registered Clinical Psychologist's experiences in conducting marital therapy with couples in India. The research involves the use of a semi-structured questionnaire designed to explore and understand the nature of their practice, sources of referral, characteristics of the couples and the types of problems they experience, factors affecting couple's relationship, their therapeutic approach and model of marital therapy they utilize, the therapeutic intervention process as well as termination of therapy. The data received has been subjected to descriptive quantitative analysis as well as a thematic analysis. The results obtained from the analysis highlight that a majority of therapists use an eclectic framework in their practice and most practitioners have not received specific training in conducting marital therapy interventions. The typical approach utilized by them in conducting therapeutic interventions with married couples is discussed alongside particular aspects pertaining to the resolution of conflicts, facilitating and enhancing communication between partners, building boundaries, the role of other family members and termination of intervention. The results are utilized to discuss the need for precise training approaches and concise guidelines that are culturally relevant for clinicians working with married couples in India. They also point toward the need to develop a cohesive framework and model of intervention which is culturally relevant and takes into account the aspects encountered by therapists in their practice.

Keywords: marital therapy, clinical psychologists, practice guidelines

4.5: Current status and training models of CBT in Asia

69/T4.5/OP/31: The dissemination of cognitive behavior therapies in Japan; two examples of exposure therapy and motivational interviewing

Authors: Hiroaki Harai, Ayaka Matsuura

Contact: director@harai.net

Country: Japan

Abstract: Aim: Exposure therapy is probably the oldest therapeutic technique and has the most robust evidence for the treatment of anxiety disorders. It is mentioned in almost all treatment guidelines and manuals for anxiety disorders published in Japan. This fact is now well known to the public, and the patient's need for experts with exposure therapy is ever-increasing in Japan. On the other hand, Motivational Interviewing (MI) is a relatively new technique and not mentioned in treatment guidelines. The first author has been practicing behavior therapy since 1986 and became the first Asian member of the Motivational Interviewing Network of Trainers Inc. (MINT) in 2003. This paper reports how two techniques are unfolded in Japan in three decades.

Subjects and methods: To measure the magnitude of dissemination, we used treatment guidelines and cognitive behavior therapy manuals for anxiety disorders available to public by health care authorities and national academic associations in Japan, and "Igaku Chuo Zasshi" (ICHUSHI), a bibliographic database established in 1903. We searched exposure therapy related keywords, "Motivational Interviewing" and "anxiety disorders" in those literatures.

Results: We found four cognitive behavior therapy manuals. All manuals recommend exposure therapy. Two mentioned increasing clients' motivation but did not specify the details. They never said MI. In ICHUSHI, we found 797 articles with exposure therapy-related keywords and "anxiety disorders" 707 articles with "Motivational Interviewing." The two techniques' annual trends showed clearly different patterns of their dissemination. Exposure therapy started early and increased since 2010. MI began late and was limited in substance use disorders at first. However, since 2020, the numbers of MI literature have steadily surpassed those of exposure therapy.

Conclusion: Even though exposure therapy is older and has more robust evidence than MI, its dissemination is much more sluggish. We will offer some future implications from these findings from the dissemination and implementation science perspective.

Keywords: Exposure therapy, motivational interviewing, dissemination, treatment guidelines, anxiety disorders

4.7: Others

65/T4.7/OP/29: Training and Education of CBT in Pakistan the educational initiatives of PACT: A One Year CBT Diploma

Authors: Sadia Abid

Contact: sadia.abid22@gmail.com

Country: Pakistan

Abstract: For a range of emotional and mental health issues, cognitive behavioral therapy (CBT) has a solid evidence base and is supported by many international associations like APA and NICE in the UK. Still, the majority of research, teaching and training originate in the West, because the health care systems in low- and middle-income nations differ greatly from those in high-income nations, it is also challenging to adapt western models there. There is also a huge difference in the cultures and traditions of East and Asian countries which makes it more challenging to adapt and implement western CBT models in these countries. PACT has

culturally adapted CBT and worked on spreading the awareness of CBT in Pakistan since 2004. Initially few mental health professionals were trained who later started a one year diploma in CBT that is the first one in Asia in 2017. The diploma aims to develop theoretical knowledge, reflective abilities and practical skills of Cognitive behavior therapy. So far 206 therapists have been trained by PACT and since 2017 PACT has been training professionals and promoting CBT on national level successfully.

Keywords: Cognitive behavioral therapy, CBT, cultural adaptation, mental health training

4.7: Others

152/T4.7/OP/70: Therapist Preferences in Cognitive-Behavioral Therapy Among Early Career Psychologists: A Quantitative and Qualitative Investigation

Authors: Dr Chinu Agrawal

Contact: feelingminds@gmail.com

Country: India

Abstract: Cognitive-Behavioral Therapy (CBT) is one of the most popular therapeutic approaches among Early Career Psychologists in India. It is intriguing that Cognitive Behavioral Therapy (CBT) stands out as a prevailing choice among early career psychologists in India, despite the diverse array of therapeutic methods taught at the postgraduate level. The purpose of this study is to uncover the underlying factors driving early career psychologists to choose CBT as their preferred therapeutic method. The participants in this research involve early career psychologists with 3 months to 2 years of experience in practice. This study employs a mixed-method approach, combining the quantitative assessment through the Cooper-Norcross Inventory of Preferences questionnaire with qualitative interviews. The study employs thematic analysis to analyze qualitative data. The qualitative data will shed light on why these psychologists choose CBT as their therapeutic approach, providing valuable insights into their decision-making processes and the factors that influence their therapeutic choices. The results will be shared during the presentation.

Keywords: Cognitive behavioral therapy, early career psychologists, therapeutic preferences.

4.7: Others

156/T4.7/OP/73: The Role of Learning Strategies on False Memory Formation

Authors: Sanjida Rahman Shova

Contact: sanjidashova98@gmail.com

Country: Bangladesh

Abstract: Learning can take place from any situation or experience. Despite that, the learned concept often becomes a challenge to remember. Therefore, effective learning strategies can assist in retaining accurate memories and make them long-lasting. The present experiment investigated the role of learning strategies on false memory formation. Two common learning strategies, rehearsal, and imagery were undertaken to see whether they contribute to creating

fewer false memories than a neutral condition. Sixty university students (50% male and 50% female with a mean age of 22.42) were recruited in a within-subject experimental design. The experiment was conducted under three distinct phases using a Bangla-adapted ten semantic word lists from the Deese-Roediger-McDermott paradigm. The initial phase was a neutral condition (N-Condition) where no strategy was used to remember the exhibited words. Subjects next practiced the words with an emphasis on their features and meaning in the rehearsal condition (R-Condition). The final phase consisted of a mental imagery condition (I-Condition) in which participants were tasked with visualizing anything relevant to the presented items. Findings depicted a significant difference ($p=.001$) between the neutral and learning conditions. Both rehearsal and imagery strategies resulted in fewer faulty memories ($M=1.03$ & $.63 < M=1.65$). The imagery approach was superior in producing more accurate memories than rehearsal. In addition, males and females significantly differed ($t(58)=2.313 > 1.96$) in creating false memories by employing the rehearsal strategy. Nonetheless, the performances were nearly identical ($M=.47$ & $.80$) in the imagery approach.

Keywords: False memory, Learning strategies, Rehearsal, Imagery.

POSTERS

4.5: Current status and training models of CBT in Asia

3/T4.5/P/1: Development of a training program on the Metacognitive Training Japanese version (MCT-J) and verification of its usefulness

Authors: Masahito HOSONO, Takuma Ishigaki, Naoya Ikeda, Ryotaro Ishikawa, Yuki Nishiguchi, Katsuyoshi Mizukami

Contact: hosonom@g.ecc.u-tokyo.ac.jp

Country: Japan

Abstract: Aim and Methodology: Our team has developed a training program for MCT-J trainers based on findings of previous studies (Hosono et al., 2023). This study aimed to evaluate usefulness of the MCT-J training program.

The MCT-J training program was conducted six times between November 6, 2021, and January 14, 2023. 236 participants, the majority of whom is the psychiatric staff, completed a 17-item questionnaire to evaluate the program's usefulness. An exploratory factor analysis was conducted to determine the questionnaire's factor structure, and the mean questionnaire items score within each factor was calculated to assess the participants' level of training understanding. One-way ANOVA was performed to confirm the differences between factors with factor number as independent variables and mean questionnaire item scores as dependent variables. Multiple comparisons were then performed using Tukey's method.

Summary of Results: Responses were received from 161 participants. A factor analysis indicated three factors. We named the first factor of five items, "Basic Knowledge and Practical Methods", the second factor of three items, "Cooperation and Preparation for Practice", and the third factor of three items, "Clinical Knowledge", respectively, with reference to the items included in each factor. The Cronbach's alpha coefficients for the three factors were .80, .79, and .66, respectively. A one-way ANOVA showed significant differences between the factors ($F=88.75$, $P<.001$). Tukey's method found that the mean score of items in Factor 2 is significantly lower than that in Factor 1, and that the mean score of items in Factor 3 is significantly lower than that in Factor 2.

Conclusions: The results of the study suggested that the newly developed MCT-J training program has the highest level of understanding of "Basic Knowledge and Practical Methods" and the lowest level of understanding of "Clinical Knowledge".

Keywords: Metacognitive Training Japanese version (MCT-J), Training program, understanding, usefulness

4.5: Current status and training models of CBT in Asia

102/T4.5/P/43: Benefits of Metacognitive Training

Authors: Kazuya Norikane

Contact: norikane-k@kagawa-puhs.ac.jp

Country: Japan

Abstract: 入院治療と外来治療を受けている統合失調症患者を対象に、メタ認知トレーニング(MCT*)を用いた介入を実施した。40人以上の被験者を対象とした介入の結果は、介入がスムーズで被験者とトレーナーの双方にとって負担が少なく、被験者の自発的な発話が増えるにつれて両者の関係が深まる可能性があることを示唆しています。これらの知見は、MCTが使いやすく、統合失調症患者に対する効果的な介入として期待されることを浮き彫りにした。

*MCTは、統合失調症の陽性症状の治療に対する新しい認知的アプローチである (Moritz & Woodward, 2007)。

We conducted an intervention using metacognitive training (MCT*) for schizophrenia patients receiving inpatient and outpatient treatment. The results of the intervention, which involved more than 40 subjects, suggest that the intervention was smooth and less burdensome for both subjects and trainers, and that the relationship between the two could deepen as the subjects' spontaneous utterances increased. I am. These findings highlight that MCT is easy to use and holds promise as an effective intervention for patients with schizophrenia.

*MCT is a new cognitive approach to the treatment of positive symptoms in schizophrenia (Moritz & Woodward, 2007).

Keywords: metacognitive training, people with schizophrenia

4.7: Others

211/T4.7/P/81: The Therapeutic Alliance: Deconstructing the Role, Manifestation and Applications of Transference.

Authors: Kezia Iris Christopher, Dr. M.Manjula

Contact: keziachristopher@gmail.com

Country: India

Abstract: Aim: This article purports to explore the concept of transference, the relevance and utility of transference in psychotherapy and further, clinical supervision, identification of signs and how it can be incorporated in cognitive-behavioural, third-wave and experiential models.

Methodology: A narrative review method has been adopted to understand the undermined aspects of transference, wherein articles in the past 15 years were reviewed. MeSH terms such as 'transference' 'therapeutic relationship' 'therapeutic alliance' 'countertransference' 'cognitive behavioural therapy' were used.

Results: The therapy setting is an emotionally charged space, where the client and the therapist experience intense emotions and reactions towards each other, which is called as transference and counter-transference. Transference refers to a client's emotional, cognitive and behavioural response to the psychotherapist that stems from their schemata, pre-existing representations of significant relationships and attachment patterns. It provides the therapist with valuable information about interpersonal world of the client, allowing scope for micro to macro interpretations, thereby allowing the facilitation of insight in the client and operationalizing change in the way the therapist and the client relate to each other. While the earliest conceptualizations within the psychoanalytical paradigm regarding the construct remains jaded, transference has emerged as powerful tool that impacts the genesis, development and

quality of the therapeutic alliance which then directly is associated with therapeutic gains and outcome.

Conclusion: With transference-focussed therapies surfacing, it remains crucial that the potential of transference is not dismissed and its workings is investigated both from the clients' and therapists' perspectives, especially in briefer forms of therapies. Further, there is a need to look at transference from a process lens, wherein the prospect of using transference is not restricted to the early phase, but is extended to being an instrument that essentially leads to the improvement of the client.

Keywords: therapeutic alliance, transference, countertransference, cognitive behaviour therapy

4.2: Legal & Policy aspects of Mental Health & Implications for CBT

245/T4.2/P/96: Mental Health and Law - The need to be more 'mindful'

Authors: Tanvi Damle . No faculty name

Contact: tanvidamle14@gmail.com

Country: India

Abstract: This paper offers a comprehensive exploration of the intricate interplay between legal and policy frameworks governing mental health in India, with a specific emphasis on its profound impact on the practice of Cognitive Behavioral Therapy (CBT). With an aim to understand the Mental Health Care Act, 2017 and the guidelines of the RCI, the paper tries to understand the scope for proactive measures to improve the status of mental health professionals in the country.

Conducting a thorough examination of prevailing legislation and mental health policies, the study unveils the evolving landscape of mental health governance in the country.

A thorough examination shows how legislative frameworks impact the accessibility, affordability, and quality of mental health services, especially when it comes to cognitive behavioral therapy. The study takes into consideration the diverse geographical and cultural aspects, shedding light on the primary challenges and potential opportunities for integrating CBT into the broader mental health ecosystem.

The paper attempts to provide valuable knowledge for practitioners and policymakers working to develop mental health care interventions in the Indian context through a critical lens focusing on legal and policy dimensions. The study intends to provide nuanced viewpoints that can inform and direct efforts to improve mental health services and support systems in India by addressing the intricacies present in the legal and legislative frameworks around mental health.

Keywords: Mental health, CBT, Legal regulations, MHCA 2017, RCI

4.7: Others

279/T4.7/P/113: An Integrative Review: Examining the Efficacy of Cognitive Behavioral Therapy in Conjunction with Transcranial Magnetic Stimulation for Depression

Authors: Gargi Shukla

Contact: mail2gargi.shukla@gmail.com

Country: India

Abstract: The purpose of this study was to determine the efficacy of cognitive behavioral therapy alongside Transcranial Magnetic stimulation for treatment of depression on the basis of already available research data. Eleven research papers were analyzed thoroughly to answer the following research questions (i) What is the role of TMS and CBT in treatment of depression? (ii) What are the challenges faced during individual treatment plans involving only CBT or TMS? (iii) Recent advancements involving utilization of CBT alongside TMS in treatment of depression

This comprehensive review paper critically examines the combined therapeutic approach of Cognitive Behavioral Therapy (CBT) alongside Transcranial Magnetic Stimulation (TMS) in the context of depression treatment. Depression, a pervasive mental health disorder, often necessitates a multifaceted intervention strategy. CBT, a well-established psychotherapeutic modality, and TMS, a neurostimulation technique with growing prominence, are both recognized for their efficacy in depression management.

The study explores factors influencing depression onset and treatment, including cognitive behavioral therapies and trans cranial magnetic technique. Utilizing databases such as Google Scholar, JSTOR, and others, the research analyzes eleven articles to synthesize findings and establish relationships. Significant neurophysiological changes are identified and are correlated to the changes that occur during utilization of CBT or TMS. Additionally, TMS and CBT emerge as potential tools for treatment of depression based on neuroimaging and cognitive-behavioral deficits.

Furthermore, the review evaluates the complementary roles of CBT and TMS in addressing cognitive distortions and neurophysiological abnormalities, respectively. Noteworthy findings from clinical trials, meta-analyses, and longitudinal studies are synthesized to provide a comprehensive overview of the current state of knowledge.

The implications of integrating CBT and TMS extend to personalized treatment plans, improved response rates, and sustained therapeutic effects. Challenges and future directions in research are also explored, offering a roadmap for refining this combined therapeutic approach. In conclusion, this review underscores the promising synergy between CBT and TMS, providing a foundation for informed decision-making in the pursuit of enhanced and comprehensive depression interventions.

Keywords: Depression, Cognitive Behavioral Therapy, Transcranial Magnetic Stimulation, Psychotherapy, Neurostimulation, Treatment Integration

4.7: Others

316/T4.7/P/115: Trauma-Focused Acceptance & Commitment Therapy: Practical Applications

Author: Vandana Choudhary

Contact: vandanaacp88@gmail.com

Country: India

Abstract: Acceptance and Commitment Therapy (ACT) is a transdiagnostic therapy which enables us to conceptualize any psychological issue in terms of its psychological inflexibility: cognitive fusion, experiential avoidance, loss of contact with the present moment, remoteness from values, and unworkable actions. ACT aims to develop and expand Psychological Flexibility which encompasses emotional openness and the ability to adapt your thoughts and behaviors to better align with your values and goals.

This makes ACT especially relevant in the context of trauma which inevitably creates psychological suffering and any attempt to eliminate the pain only amplifies it. Hence Trauma-focused ACT (TF-ACT) has been conceptualized as a compassion-based, exposure-centered approach to doing ACT to a range of psychological traumatic event-related disorders. Since it's an especially recent approach to doing ACT, the present lecture will try to unpack the practical applications of doing the TF-ACT. This includes discussing the useful skill sets, techniques, worksheets, and practically relevant metaphors presented in a systematic with three major focuses, i.e., living in the present, healing the past and building the future.

Keywords: Trauma-focused ACT, living in the present, healing the past and building the future



ACBTA 2024 NEW DELHI SCIENTIFIC PROGRAM

SPECIAL SYMPOSIA **Celebrating 50 years of** **JABCT, Japan**

SPECIAL SYMPOSIA

CELEBRATING 50 YEARS OF JAPANESE ASSOCIATION OF BEHAVIORAL AND COGNITIVE THERAPY (JABCT)

SSJ/1: 50 years of CBT and beyond—Lessons learned from dissemination of CBT in Japan

Authors: Yasuko Togasaki

Country: Japan

The Japanese Association of Behavioral and Cognitive Therapy stands as one of the oldest Cognitive Behavioral Therapy (CBT) organizations globally, marking its 50th anniversary next year. The association, under influence of Western CBT societies, has flourished uniquely to address domestic needs. To contribute to the advancement and alliance of the Asian Cognitive Behavioral Therapies Association (ACBTA), this symposium aims to explore the evolution of CBT training in Japan and to identify necessary systems for further disseminating CBT across Asian countries.

History of the Japanese Association of Behavioral and Cognitive Therapy: Where we stand, where to go

The Japanese Association of Behavioral and Cognitive Therapy (JABCT) will be celebrating its 50th anniversary in the upcoming year. Founded in 1974 as the Japanese Association of Behavior Therapy, the association has grown to comprise over more than 2400 members and has played a pivotal role in disseminating cognitive behavioral therapy across the nation. As the current and first female president of the association, I will share in this presentation how JABCT has flourished by adapting to the cultural context and responding to the specific needs of the local society. Promoting diversity and social inclusion are crucial elements in achieving the goal of disseminating CBT. Challenges encountered in disseminating CBT in a country where psychological services are not widely acknowledged will be discussed, and efforts to overcome these barriers are introduced. A valid strategy for dissemination is to increase the number of practitioners who can provide CBT services. Thus, a particular focus will be placed on CBT training and supervision for mental health care providers within Japan. Finally, future endeavors of the JABCT will be outlined. International collaboration is essential in accomplishing evidence-based treatment around the globe. It is our hope to play an active role in the attainment of this task, and to work in close alliance with the Asian CBT association and the World Confederation of Cognitive and Behavioural Therapies. As the JABCT looks to the future, a commitment to expanding CBT services through training, supervision, and international collaboration remains steadfast, marking a dedicated pursuit of evidence-based treatment on a global scale.

Keywords: Cognitive Behavioral Therapy, Japanese Association of Behavioral and Cognitive Therapy

SSJ/2: Cultural adaptation in the dissemination of cognitive behavioral therapy

Authors: Satoko Sasagawa

Country: Japan

The 50 years of the history of Japanese Association of Behavioral and Cognitive Therapy (JABCT) is intricately linked with the development of cognitive behavioral therapy (CBT) in Western countries. Many of the techniques proven to be effective in other countries has benefited Japanese clients seeking help for psychological problems; however, in importing such techniques, acknowledgement of the local context has been essential. This presentation will share what cultural adaptations and modifications were made in disseminating and implementing CBT domestically, and how such efforts were received by the Japanese population. An emphasis is placed on challenges encountered and efforts made to promote CBT training and supervision, particularly in capturing the interest of clinicians who were not familiar with CBT and encouraging them to acquire new skills. Valid strategies included 1) providing culture-friendly content and developing original, culturally informed programs, 2) offering various training opportunities with both domestic and international experts, 3) organizing conferences and enhancing publicity to foster social cognition, and 4) initiating changes to the public insurance system to include coverage for CBT treatment. These actions have contributed to an expanded population of capable CBT therapists and supervisors, establishing CBT as one of the most widely acknowledged psychological treatment. The promotion of CBT has proven to be beneficial to clients, who can now opt for standardized evidence-based treatment across a wide array of situations. The presentation concludes by exploring future directions for the continuous improvement and development of training and supervision systems.

Keywords: (JABCT), CBT, Culturally Informed Programs

SSJ/3: Cognitive Behavioral Therapy Training and Supervision in Japan

Authors: Miki Matsunaga

Country: Japan

Supervision systems in Japan have developed in a unique way, under the influence of psychoanalytic psychotherapy and client-centered therapy, both of which gained popularity in Japan before cognitive-behavioral therapy (CBT). In particular, the qualification system for

obtaining license as a clinical psychologist has been influential, which mandates graduate students to accumulate certain hours of supervision. Consequently, the most prevailing model of supervision is the master/ apprentice system, in which supervisors provide one-to-one supervision to students. While this system offers the advantage of close mentorship, it tends to be more subjective, with the content of supervision and standards of achievement relying heavily on the supervisor. Furthermore, after completing graduate school, clinicians often find themselves to be unaided in their clinical judgment, due to the absence of a structured supervision system. This has resulted in instances where clinicians practice CBT without adequate training. In response to this situation, the Japanese Association of Behavioral and Cognitive Therapy (JABCT) has developed training guidelines for CBT and is establishing its own training courses. This initiative was prompted by the introduction of a national qualification system for certified psychologists in 2018. The Japanese education system has undergone significant changes with the incorporation of the certified psychologist curriculum. In this presentation, I aim to provide an overview of the current CBT training system and supervision within Japanese graduate schools, with a particular focus on the existing challenges in education and training in Japan.

Keywords: JACBT, Model of Supervision, Current CBT Training System

SSJ/4: Training and accreditation of Cognitive Behavioral Therapists in Japan

Author: Tomu Ohtsuki

Country: Japan

Cognitive Behavior Therapy (CBT) stands as a widely acknowledged and evidence-based psychological treatment method for various mental health disorders. In order to ensure the delivery of optimal care, CBT therapists are required to undergo training and obtain licensing to validate their skills and knowledge. The World Confederation of Cognitive and Behavioural Therapies (WCCBT) has created an expert committee on the accreditation and training and published training guidelines, which were adopted in 2023 at the 10th World Congress held in Seoul. These guidelines aim to create a universal understanding of the knowledge and competencies necessary for practicing CBT, promoting evidence-based practices around the world. Domestically, the JABCT instituted a certification system for Japanese CBT therapists in 2019 to ensure therapeutic quality. This system encompasses: 1) the formulation of training guidelines, 2) the establishment of an education and training system based on these guidelines, 3) the implementation of a supervision system, 4) certification of qualifications, and 5) a framework for qualification renewal. This presentation seeks to outline the key aspects of our certification and training system. Special emphasis is placed on supervision and case reports, requiring applicants to submit reports for two clients who underwent CBT, complete with objective outcome measures. This procedure aims to substantiate the applicants' competence

in real-world treatment situations, moving beyond the reliance on traditional paper tests and mere assessments of CBT knowledge. Future directions for training and accreditation are discussed.

Keywords: JABCT, CBT, formulation of training guidelines

Authors' Directory

A, Jaimathisa	120(OP)*, 121(OP), 125(OP)*
Abid, Sadia	197(OP), 231(P), 257(OP)*
Achala, V Kumar	65(P)*
Adachi, Koichiro	234(P), 235(P), 236 (P)*, 239(P)
Adam, Helena	89(OP)*
Adithy	41(OS)*
Agarwal, Manju	42(OS)*, 139(OP)
Agarwal, Sarita	161(P)*
Aggarwal, Piyush	71(P)*
Agrawal, Chinu	38(S)*, 49(OP)*, 140(OP), 160(P), 187(OS)*, 201(OP)*, 201(OP)*, 206(OP)*, 241(P)*, 258(OP)*
Agrawal, Ravindra	190(OS)*
Ahmad, Mahadir	113(OP)
Ahmed, Farzana	196(OP)*
Akhouri, Deoshree	127(OP), 134(OP), 134(OP)*
Akhtar, Mehr	217(OP)*
Akther, Saima	117(OP)*, 197(OP)*
Akwue, Ojore Solomon	69(P)*, 68(P)*
Al-Hakeem, Marzia	91(OP)*
Alam, Mohammad Zayeed Bin	98(OP), 91(OP)
AlMashoor, Syed Ahmad	106(OP)
Alvi, Shehla	117(P)*
Anand, Nitin	183(VP)
Andree	188(OS)*, 202(OP)*
Andreev, Ilya	48(OP)
Antony, Reshma	245(P)*
Ara, Zannat	98(OP)
Aravind, Arya	42(OS)*, 138(OP)*
Arimura, Yuki	162(P)*
Armour, Ellen	232(P)
Arora, Silky	37(OS)*
Arumugham, Shyamsundar	177(P)
Arya, Amit	194 (OP)
Arya, Navvya	175P)*
Asad, Zaina	68(P)*
Asimiran, Soaib	250(VP)
Aun, Tan-Kit	107(OP)

*Presentation Author

KNL – Keynote Lecture; IT – Invited Talk; SC – Skill Class; IS – Invited Symposium
OS – Open Symposium; OP – Oral Presentation; P – Poster; VP - Virtual Presentation



Awang, Hamidin	45(OP), 74(VP), 93(OP)
Ayaka, Yanagida	144 (P), 228(P)
Ayyub, Sayma	139(OP)*
Aziz, Abdul	224(P)
B, Arunashree	52(OP)*
B, Siva	120(OP), 121(OP)*, 125(OP)
Baba, Shiori	228(P)*
Badada, Sanjay Kumar	169(P)
Badrujaman, Aip	96(OP)
Badrudin, Muhammad Nur Waafi	250(VP)*
Bahu, Meera	1(KNL)*
Bai, Xuelian	97(OP)
Balachander, Sreenivas	87(OS)*
Balasubramanian, Sri Abinaya	160 (P), 206 (OP), 241 (P)
Balmonte, Juli-ann	143(P)*
Balrambhai, Sharma Suman	56(OP)*
Banerjee, Saranya	81(OS)*, 145(P)*
Bansal, Ranju	159 (P)
Baruah, Palkee	212(OP)
Bashir, Izzati Mohd	107(OP)*
Bashir, Tabassum	134(OP)
Basu, Debasish	168(P)
Basu, Sharmistha	89(OP)*
Behera, Chittaranjan	37(OS)*, 107(OP),108(OP)
Benegal, Vivek	118(OP)
Bennett, Cathlyn Niranjana	164(P)
Bharadwaj, P)ooja	164(P), 165(P)*
Bhatia, Urvita	186(OS)*
Bhatnagar, Akanksha	232(P)
Bhatt, Gayitri	41(OS)*
Bhatta, Khem	129(OP)
Bhattacharya, Shreya	79(OS)*
Bhattacharya, Suvosree	215(OP)*
Bhattacharyya, Madhumita	103(OP), 193(OP), 202(OP)
Bhojani, Meera K.	207(OP), 208(OP)
Bhola, Poornima	40(OS)*
Binukumar, B	104(OP)
Björgvinsson, Thröstur	173(P)
Brar, Aneel	190(OS)*
Butt, Mirrat Gul	197(OP)*, 231(P)*
Cardos-Oltean, Roxana	116(OP)*, 120(OP)*
Ceyloni, Zahbiya Joozer	137(OP)*

*Presentation Author

KNL – Keynote Lecture; IT – Invited Talk; SC – Skill Class; IS – Invited Symposium
OS – Open Symposium; OP – Oral Presentation; P – Poster; VP - Virtual Presentation



Chadha, Mansi	80(OS)*, 82(OS)*
Chakraborty, Sampurna	36(OS)*
Chakraborty, Aishwariya	163(P)*
Chakraborty, Arunita	239(P)*
Chakraborty, Rituparna	66(P)
Chakraborty, Sampurna	36(OS)*, 78(OS)*, 79(OS)*, 90(OP)*
Chamhuri, Nur Syazwani	113(OP)
Chang, Sijia	196(OP)*
Chauhan Mehta, Gargi	84(OS)*
Chen, Zixin	80(OS)*
Chhibber, Kamna	256(OP)*
Chiba, Hiroyuki	230(P)
Chitre, Tanvi	156(P)*
Cho, Tetsuji	157(P)
Chodankar, Bindiya	186(OS)*
Choi, Juhee	211(OP)*, 243(P)
Choi, Kee-Hong	167(P), 243(P), 246(P)
Choksi, Tanu	38(OS)*, 49(OP)
Choudhary, Apoorva	47(OP)*,
Choudhury, Anindita	215(OP)
Choudhury, Arpita Roy	141(P)*
Chouhan, Poonam	160(P)
Christo(P)her, Kezia Iris	261(P)*
Chun, Wang	23(SC)*, 80(OS)*, 97(OP), 147(P)
Chung, Kyong-Mee	31(IS)*, 12(IT)*
Clifton, David A	48(OP)
Courtney, James A.	1(KNL)*
Cuijpers, Pim	3(KNL)*
Dadhwal, Vatsla	55 (OP)
Dadoo, Niharika	169(P)*
Dagar, Priyanshu	57(OP)
Dalvi, Asmita	103(OP)*
Damle, Tanvi	262(P)*
Das, Sneha	36(OS)*, 78(OS)*, 79(OS)*, 131(OP)*
Das, Basudeb	101(OP), 102(OP), 193(OP)
Das, Debalina	63(P)*
Das, Nileswar	174(P)
Das, Sanjukta	147(P)*
Datta, Manjistha	57(OP)
David, Daniel	213(OP), 217(OP), 244(P)
David, Daniel O.	163(P)
David, Oana	166(OP)

*Presentation Author

KNL – Keynote Lecture; IT – Invited Talk; SC – Skill Class; IS – Invited Symposium
OS – Open Symposium; OP – Oral Presentation; P – Poster; VP - Virtual Presentation



Deeba, Farah	117(OP), 196(OP)
Deepika	207(OP)*
Desai, Geetha	245(P), 124(OP)
Dessa, Rayani	50(OP)*
Devi, Asem Babina	130(OP)*
Devi, Bachaspatimayum Deeparani	105(OP)*
Devi, K. Dharani	40(OS)*
Devi, Usha	55(OP), 80(OS)*, 82(OS)*
Dhilo, Poonam	190(OS)*
Dhir, Rhea	194(OP)*
Dhuna, Deepak	19(IT)*, 22(SC)*
Ding, Wai-Eng	74(VP)*
Dingankar, Sunila	78(OS)*
Dobson, Keith	4(KNL)*
Dolma, Tenzin	216(OP)*, 240(P)*
Dosani, Aliyah	190(OS)*
Du, Pengyu	80(OS)*, 95(OP)*
Dubey, Aditi	189(OS)*
Dumitru, Elisa	120(OP)
Dutta, Dew	243(P)*
El-Khani, Aala	96(OP)
Elefant, Felice	232(P)*
Emmanuel, Jeslin	190(OS)*
Eng, Ding Wai	45(OP), 93(OP)
Essau, Cecilia A.	7(KNL)*
Ethan	153(P)
Eto, Aiko	237(P)*
Etowa, Josephine	190(OS)*
Fadzil, Farizal	113(OP)
Fadzlina, Amani	224(P)*
Farhan PM, Sayyiead Muhammed	220(OP)
Fatima, Ummul	174(P)*
Fatima, Zehra	176(P)*
Fausiah, Fitri	219(OP)*
Fitri, Eva	96(OP)
Floean, Stelian	213(OP), 244(P)
Fujiwara, Kazumasa	227(P), 228(P)
Fukuda, Ryotaro	249(VP)
Fukudome, Takanori	182(VP)*
Furutani, Kaichiro	158(P)
G, Dhanalakshmi Divya	207(OP)
G, Padmaja	135(OP)

*Presentation Author

KNL – Keynote Lecture; IT – Invited Talk; SC – Skill Class; IS – Invited Symposium
OS – Open Symposium; OP – Oral Presentation; P – Poster; VP - Virtual Presentation



Gadkari, Anjor	60(P)*
Gadkari, Anupama	60(P), 78(OS)*
Garaya, Amandeep Singh	57(OP)*
Gaur, Sanya	107(OP)*
Gazi, Imtiaz Uddin	156(P)*
Ghosh, Anindita	78(OS)*, 101(OP)*, 189(OS)*
Ghosh, Debaleena	62(P)*, 155(P), 189(OS)*, 193(OP)*
Ghosh, Doyel	83(OS)*
Ghosh, Kaustav	205(OP)*
Ghosh, Surabhi	141(P)*
Gopalakrishnan, Upasna	177(P)*
Goyal, Nishant	49(OP), 131(OP), 155(P), 202(OP)*
Graves, Elizabeth	16(IT)*
Guan, Siqing	162(P), 226(P)
Guo, Jieni	97(OP)
Gupta, Shrestha Sen	52(OP)
Gupta, Anviti	71(P)
Gupta, Archana	125(OP)*
Gupta, Bandana	57(OP)
Gupta, Dharaa	55(OP), 83(OS)*
Gupta, Meenakshi	105(OP), 208(OP)*
Gupta, Pawan Kumar	57(OP)
Gupta, Preeti	51(OP), 148(P)
Gupta, Reema	77(OS)*
Gupta, Ruby	67(P)*
Gupta, S.K.	168(P)
Haar, Karin	96(OP)
Habib, Murshida Ferdous Binte	112(OP)
Hagen, Kristen	173(P)
	27(SC)*, 33(IS)*, 36(OS)*, 52(OP),
Haldar, Susmita	81(OS)*, 89(OP), 91(OP), 141(P),
	141(P), 180(P), 205(OP), 217(OP),
	218(OP), 221(OP), 239(P), 243(P)
Hamza	134(OP)*, 134(OP)
Hamzah, Siti Raba'ah	250(VP), 250(VP)
Hansen, Bjarne	173(P)
Harai, Hiroaki	256(OP)*, 149(P)*
Harun, Abdullah Al	204 (OP)*
Hashim, Mohamad	106(OP)
Hashimoto, Rui	229(P)
Hayashi, Yuta	226(P)
Henriques, Mavis Lilian	132(OP)*

*Presentation Author

KNL – Keynote Lecture; IT – Invited Talk; SC – Skill Class; IS – Invited Symposium
OS – Open Symposium; OP – Oral Presentation; P – Poster; VP - Virtual Presentation



Hirata, Yuya	169(P)
Hiroaki, Kumano	226(P)
Hjelle, Kay Morten	173(P)
Hollon, Steven	3(KNL)*
Hong, Euntaek	66(P)
Hong, Ng Wing	231(P)
Horikoshi, Masaru	157(P)
Hosono, Masahito	260(P)*
Hossain, Md Razon	48(OP)
Hossain, Khondoker Mokaddem	54(OP)*
Hossain, Md. Sazzad	200(OP)
Hossain, Shahanur	200(OP)
Hudson, Jennie	30(IS)*, 15(IT)*
Huey, Lee Sook	94(OP)*
Huque, Akib Ul	156(P), 195(OP), 199(OP)
Hussain, Alifya	52 (OP)
Hussain, Md. Amir	95 (OP)*
Ichikawa, Hiroshi	153 (P)
Ikeda, Naoya	260 (P)
Ikegawa, Masaya	153 (P)
Inoue, Masahiko	238 (P)*
Irfan, Muhammad	109 (OP), 198 (OP)
Ishigaki, Takuma	260 (P)
Ishikawa, Ritsu	181 (VP)*
Ishikawa, Ryotaro	260 (P)
Ishikawa, Shin-ichi	16(IT)*
Islam, Md. Shariful	97 (OP)
Ismail, Wan Nor Najihah	231 (P)
Ito, Hiroshi	153 (P)
Ito, Hiroyuki	166 (P)
Ito, Masataka	153 (P)
Ito, Masaya	157(P), 230 (P)
Jahan, Israt	200(OP)*
Jahan, Masroor	105(OP)
Jahan, Nudrat	127(OP)*
Jahan, Sabiha	40 (OS)*, 189(OS)*
Jahan, Shadma	127(OP)
Jahanara, Nuzhat	48(OP)*
Jaimathisa. A	(OP)*
Jang, Jihee	120(OP)*, 121(OP), 125(OP)*
Jaturawattana, Warisa	165(P)
Jha, Manisha	191(OS)*

*Presentation Author

KNL – Keynote Lecture; IT – Invited Talk; SC – Skill Class; IS – Invited Symposium
OS – Open Symposium; OP – Oral Presentation; P – Poster; VP - Virtual Presentation



Jha, Nitesh Kumar	47(OP)
Johnson, Jemimah A.	210(OP)*
Juneja, Swati	140(OP)
Jung, Sooyun	246(P)
K, Swetha	119(OP)
Kaji, Kohki	239(P)*
Kallestad, Håvard	173(P)
Kalsi, Navkiran	33(IS)*
Kanazawa, Junichiro	151(P)*
Kaneyama, Yumi	236(P)*
Kang, Boyoung	243(P)*
Kang, Minjung	211(OP)
Kareem, Rabia	109(OP)*
Karmakar, Alpona	112(OP)*
Karve, Swati	28(SC)*
Kataoka, Yusuke	169(P)
Kato, Miyuki	146(P)
Katsuragawa, Taisuke	148(P), 249(VP), 251(VP)
Kaur, Mandeep	83(OS)*
Kaur, Ravneet	108(OP)
Kawasaki, Tomoko	237(P)
Kedia Gupta, Swati	86(OS)*
Khan, Jasar	155(P)*
Khan, Kamrun Nahar	242(P)*
Khan, Saima	42(OS)*
Khan, Shaffaque Ikhtiar	198(OS)*
Khanam, Mahfuza	154(P)
Khanna, Vidhi	80(OS)*, 82(OS)*
Khatun, Hazera	189(OS)*
Khatun, Jobeda	114(OP)
Khatun, Nazma	197(OP)
Khichi, Nisha	190(OS)*
Khondaker, Ruma	189(OS)*
Khurana, Rati	219(OP)*, 25(SC)*, 132(OP)
Kim, Boong-Nyun	223(P)
Kim, Hyunjin	243(P)
Kim, Ye-Seul	246(P)*, 167(P)
Kimura, Kentarou	157(P)
Kirpekar, Vivek	78(OS)*
Kirsch, Irving	244(P), 213(OP)
Kishigami, Taiki	226(P)*
Kishore, M. Thomas	86(OS)*, 104(OP)

*Presentation Author

KNL – Keynote Lecture; IT – Invited Talk; SC – Skill Class; IS – Invited Symposium
OS – Open Symposium; OP – Oral Presentation; P – Poster; VP - Virtual Presentation



Kito, Shinsuke	230(P)
Kobayashi, Rina	146(P)
Kobayashi, Yuta	146(P)
Kochhar, KP	185(OS)*
Kochhar, Megha	99(OP), 44(OP)
Kodancha, Preeti	71(P)*
Komazawa, Asami	157(P)
Kondo, Masaki	230(P)
Kongsonthana, A.	100(OP)*
Kothiwale, Tanvi	136(OP)
Kovpak, Dmitrii V	12(IT)*
Kuga, Hironori	32(IS)*, 34(IS)*, 157(P), 230(P)
Kukreja, Tanu	247(P)*
Kulshreshtha, Shreya	58(OP)*
Kumano, Hiroaki	144(P)*, 146(P), 162(P), 226(P)
Kumar, Ajay	104(OP), 125(OP), 174(P), 254(OS)*
Kumar, Athi	113(OP)
Kumar, Nimisha	219(OP), 127(OP)
Kumar, Rajesh	100(OP), 113(OP)
Kumar, Ranjeet	209(OP)
Kumar, Shraddhesh	55(OP)
Kumar, Vikas	100(OP)*
Kumari, Archana	55(OP)
Kuribayashi, Kazuto	223(P)
Kuroda, Satori	238(P)
Kuroki, Tsukasa	226(P)
Kurosawa, Takumu	234(P)*, 235(P), 236(P)
Kusakabe, Noriko	158(P)
Lakshmikanth, Sindhura	124(OP)*
Lang, Nan	80(OS)*, 94(OP)
Lee, Eunbyeol	243(P)
Lee, Sejeong	223(P)
Leelasangsai, Sunthariya	115(OP)*
Lenka, Priyanka	49(OP), 101(OP)
Li, Zhengyi	23(SC)*, 80(OS)*, 97(OP)*
Lichen, Ouyang	147(P)*
Lima, Marika Francisca De	132(OP)
Loades, Maria	89(OP)
Luo, Yan	153(P)
Lynn, Steven Jay	244(P)
M, Aadhithya	122(OP)*, 215(OP),
M, Manjula	245(P), 254(OS)*, 261(P)

*Presentation Author

KNL – Keynote Lecture; IT – Invited Talk; SC – Skill Class; IS – Invited Symposium
OS – Open Symposium; OP – Oral Presentation; P – Poster; VP - Virtual Presentation



M, Netravathi	124(OP)
M, Pujitha	122(OP), 122(OP)*, 215(OP)
Maalouf, Wadih	96(OP)
Machida, Minori	145(P)
Madan, Drishte	86(OS)*
Madoka, Hoshino	228(P)*
Maeda, Chiharu	251(VP)
Maeda, Koushi	146(P)
Mahadevan, Jayant	74(VP)
Mahapatra, Ananya	86(OS)*
Mahapatra, Jashobanta	75(VP)
Mahato, Akash Kumar	218(OP)
Mahey, Reeta	58 (OP)
Mahmud, Ashik	199(OP)*
Mahmud, Rysul Islam	97 (OP)*
Mahour, Pooja,	56 (OP)
Makino, Miyuki	127 (P)
Malhotra, Karishma	140 (OP)*
Malhotra, Shahzadi	191 (OS)*
Malik, Kanika	186 (OS)*
Malik, Supriya	212 (OP)*
Mamat, Firdaus	250 (VP)
Manjula, M.	245 (P), 254 (OS)*, 261 (P)
Mao, Nanamori	144 (P), 228 (P)
Mathur, Mahak	84 (OS)*
Matsumoto, Yuki	152 (P)
Matsunaga, Miki	158 (P)*
Matsuura, Ayaka	149 (P), 256 (OP)
Matsuyama, Miku	162 (P), 226 (P)
Maurya, Rachana	80 (OS)*
Maurya, Rachana	(OS)*
McGinn, Lata K.	2(KNL)*
Medhi, Bikash	169 (P)
Mehrotra, Kanika	40 (OS)*
Mehta, Urvakhsh	118 (OP)
Methila, Alima Akter	195 (OP)*
Milea, Ion	120(OP)
Miller, Allen	31(IS)*, 15(IT)*
Minamitani, Noriko	150 (P)*
Minayati, Kusuma	181 (VP)*
Minj, Reena	171(P)*
Mishra, Pragya	64 (P)*

*Presentation Author

KNL – Keynote Lecture; IT – Invited Talk; SC – Skill Class; IS – Invited Symposium
OS – Open Symposium; OP – Oral Presentation; P – Poster; VP - Virtual Presentation



Mitamura, Yasue	32 (IS)*, 157 (P)
Mitamura, Yasue	32(IS)*
Miyoshi, Mirai	142 (P)*
Mizukami, Katsuyoshi	260 (P)
Modi, Manish	169 (P)
Mohandas, Maneesha	55 (OP)*
Mohanty, Manju	168 (P)
Mozumder, Muhammad Kamruzzaman	39 (OS)*
Mozumder, M. Kamruzzaman	92 (OP)
Muda, Zulaiha	250 (OP)
Mukherjee, Chilka	81 (OS)*
Mukherjee, Sagar	177 (P)
Mukhopadhyay, Pritha	215 (OP)
Mukhtar, Firdaus	6 (KNL)*, 22 (SC)*, 45 (OP)*, 46 (OP)*, 93 (OP)*, 107 (OP), 231 (P), 250(VP)
Mukhtar, Hjh. Firdaus	74 (VP)
Munda, Sanjay Kumar	51 (VP)
Murayama, Keitaro	143 (P)*
Musa, Siti Nur Syuhada	250 (VP), 250 (VP)*
Muto, Takashi	153 (P)
Mydin, Yasmin Othman	106 (OP)*
N, Dharini Sree	119 (OP)
Nadkarni, Abhijit	190 (OS)*
Nag, Ananya	52 (OP)*
Nag, Ritwika	36 (OS)*, 188 (OS)*
Naganuma, Chinatsu	233 (P)*
Nagatsuka, Shunsuke	229 (P)*
Naheean, Shah Mohammad	96 (OP)
Nair, Rajesh	247 (P)
Nair, Sanjana	66 (P)*
Nair, Sindhu	231 (P)*
Nakamura-Taira, Nanako	158 (P)
Nakamura, Tomoya	151 (P)
Nakao, Tomohiro	33(IS)*
Nakatani,	238 (P)
Nam, Gi-Eun	223 (P)
Namiki, Kei	238 (P)
Nanamori, Mao	144 (P), 228 (P)
Narayanan, Gitanjali	74 (VP)
Narotama, Narendra	96 (OP)
Naruka, Komal	179 (P)

*Presentation Author

KNL – Keynote Lecture; IT – Invited Talk; SC – Skill Class; IS – Invited Symposium
OS – Open Symposium; OP – Oral Presentation; P – Poster; VP - Virtual Presentation



Nath, Krish	6(KNL)*, 21(SC)*
Nath, Manisha	99 (OP)*
Neeraj,	37 (OS)*
Neogy, Pallavi	44 (OP)*
Neogy, Snehasree	180 (P)*
Ng, Sameeta	53 (OP)
Nijhum, Rehnuma Pervin	117 (OP)*
Nishiguchi, Yuki	260 (P)
Nishimatsu, Yoshiko	144 (P)
Nishimoto, Ayano	238 (P)
Nishinaka, Hirofumi	233 (P)
Noami, Kei	230 (P)
Nor, Nadia Md.	113 (OP)
Norikane, Kazuya	260 (P)*
Norton, J	10(IT)*
Nozomi, Tomita	228 (P)
Numata, Noriko	237 (P)
Nusrat, Tahmida	114 (OP)*
Oe, Misari	9(IT)*
Ohashi, Shoichi	227 (OP)*
Ohtsuki, Tomu	251(VP)
Oi, Hitomi	32(IS)*
Okajima, Junko	158 (P)
Okajima, Miyo	158 (P), 169 (P)*
Okawa, Sho	166 (P)*
Okolo, Stephanie Rocky	199 (OP)*
Okumura, Takako	157 (P)
Ono, Yutaka	32(IS)*
Otake, Makoto	233 (P)
Othman, Azizah	94 (OP)
Oyama, Kazuki	229 (P)
Pahalwan, Samridhi	74 (VP)*
Palsapure, Shishir	25(SC)*
Panda, Santona	75 (VP)*
Pande, Madhu	42 (OS)*
Pandey, Rashmi	77 (OS)*
Parihar, Ruchi	136(OP)*
Park, Chansol	223(P)
Park, Subin	66(P)
Parveen, Zohora	203(OP)*
Patel, Mansi	171(OP)*
Patel, Rekha	83(OS)*

*Presentation Author

KNL – Keynote Lecture; IT – Invited Talk; SC – Skill Class; IS – Invited Symposium
OS – Open Symposium; OP – Oral Presentation; P – Poster; VP - Virtual Presentation



Pathak, Kanan	105(OP)*
Pathak, Sweta Kumari	152(P)*
Patra, Bichitra Nanda	139(OP)
Permpoonputtana, K.	100(OP)
Pervin, Sumiya	195 (OP)
Phiri, Peter	17(IT)*, 17(IT)*
Phogat, Poonam	128 (OP)
Phon, Wichitra	113(VP)*
Poddar, Shuvabrata	100 (OP)
Prakash, Ajay	169 (P)
Prasad, Barre V	135(OP)*, 139(OP)
Prasanna, R.Vivek	59 (P)*
Predatu, Petronela	213(OP)*, 244 (P)*
Predatu, Răzvan	213 (OP), 217 (OP)*, 244 (P)
Premji, Shahirose	190(OS)*
Pritviraj M, Manoj	64 (P)
Puar, Sonia	190 (OS)*
Pujari, Venkateswar	193 (OP)*
Puri, Shweta	38 (OS)*, 49 (OP)
Puri, Shruti	83 (OS)*
Purty, Sunita	84(OS)*, 188 (OS)*
Puttakiaw, Poomwit	93 (OS)*
Qiao, H	152 (P)
Qureshi, Afreen	132 (OP)*
R, Sanjay.	120 (OP), 121 (OP), 125 (OP)
R.K, Roshini	207 (OP)
Rahman, Arifa	115 (OP)
Rahman, Mahmudur	33 (IS)*, 189 (OS)*
Rahmank, Mohammad Mizanur	189 (OS)*
Raipure, Ankita Vijay	49 (OP)*
Rajendran	178 (P)
Rakshena, AR.	215 (OP)*, 122 (OP), 122 (OP)
Ram, Daya	103 (OP), 148 (P)
Ramlee, Fatanah	94 (OP)
Rana	176 (P)
Rana, Mita	19(IT)*
Rana, Suvashisa	135 (OP)
Rapee, Ronald M.	166 (P)
Rathod, Shanaya	5(KNL)*
Rathore, Riju	252 (VP)*
Ray, Sukanya	41 (OS)*
Ray, Dr. Deepshikha	163 (P)

*Presentation Author

KNL – Keynote Lecture; IT – Invited Talk; SC – Skill Class; IS – Invited Symposium
OS – Open Symposium; OP – Oral Presentation; P – Poster; VP - Virtual Presentation



Ray, Hemant Narayan	123 (OP)
Reddy K R, Sachin	87 (OS)*
Reynolds, Shirley	10 (IT)*
Rifna A.M., Aysha	220 (OP)*
Roy, Prasanta Kumar	21 (SC)*, 83 (OS)*
Rusdi, Liza Hartini	46 (OP)
S, Gayathri	188 (OS)*, 205 (OP)*
S, Jaisoorya T.	125(OP)
S, Umesh	102 (OP)
S, Vidhya	119 (OP)*
Sachdeva, Kudrat	126 (OP)*
Sadaf J, Anisa	207 (OP)*
Sagar, Rajesh	55 (OP), 58 (OP), 80 (OS)*
Saha, Madhurima	92 (OP)*, 98 (OP)
Saha, Preethul	243(P)
Saha, Pritu	154 (P)*
Saha, Sayan	174 (P)*
Sahu, Anamika	178 (P)
Saini, Sai Sudha	187(OS)*, 201 (OP)
Saito, Yoshihiro	187 (OS)*, 201 (OP)
Sakata, Atsusshi	144 (P)*
Sakata, Masatsugu	30(IS)*, 153(P)*
Salkovskis, Paul	4(KNL)*
Samajdar, Shinjini	81 (OS)*, 91 (OP)*
Samuel, Priyanka	153 (P)*
Sann, Lye Mui	45 (OP)
Sann, Dato' Lye Munn	74 (VP)
Sann, Lye Munn	93 (OP)
Sarkar, Madhurima Dey	221 (OP)*
Sarkar, Priyanka	115 (OP)*
Sasaki, Misa	251 (VP)*
Satapathy, Sujata	37 (OS)*, 55 (OP)*, 58 (OP), 80 (OS)*, 82 (OS)*, 107 (OP), 135 (OP), 139 (OP)
Sato, Hiroshi	236 (P)
Sato, Miyuki	236 (P)
Satyanarayana, Veena	52 (OP)
Saxena, Osheen	86 (OS)*, 104 (OP)*
Saxena, Ravi Kumar	135 (OP)
Sayeed, Neha	51 (OP), 102 (OP), 131 (OP)
Sengupta, Usri	123 (OP)*
Seo, Heewon	167 (P), 246 (P)
Sequeira, Miriam	186(OS)*

*Presentation Author

KNL – Keynote Lecture; IT – Invited Talk; SC – Skill Class; IS – Invited Symposium
OS – Open Symposium; OP – Oral Presentation; P – Poster; VP - Virtual Presentation



Sethi, Mifrah Rauf	110 (OP)*
Sethi, Purva	179 (OP)
Shah, Dhruvi	161 (P)*
Shahnawaz, Fatima	45 (OP)
Shakya, Suraj	20 (IT)*, 129 (OP)
Shamsudeen, Sheeba	36 (OS)*, 51 (OP)*, 84 (OS)*, 188 (OS)*
Shanbhag, Trusha Pramod	148 (P)*
Sharan, Anjali Midha	256(OP)
Sharan, Pratap	83(OS)*, 174 (P)
Sharma, Parth	50 (OP)
Sharma, Rachna	83 (OS)*, 174 (P)
Sharma, Renu	37 (OS)*, 58 (OP), 80 (OS)*
Sharma, Akanksh	71 (P)
Sharma, Aradhya	233 (P)*
Sharma, Mona	78 (OS)*
Sharma, Phurailatpam Rajluxmi	53 (OP)*
Sharma, Purna	24(SC)*
Sharma, Rahul	209 (OP)*
Sharma, Reena	213(OP)*
Sharma, Ritu	105 (OP)
Sharma, Seema	245 (P)*, 247(P)
Sharma, Stuti	247(P)*
Sharma, Vibha	191 (OS)*
Sharma, Vishal	169 (P)
Sharma, Yamini	174(P)
Sharon, Suganthi Caroline S	118(OP)*
Sherpa, Stella Yangzee	103(OP)*, 128(OP)*
Shimada, Hironori	181(VP), 182(VP), 233(P), 229(P)
Shimamoto, Tomonari	153(P)
Shimizu, Eiji	227(P), 228(P), 237(P), 142(P), 166(P)
Shimoda, Mariko	235(P)*
Shin, Min-Sup	223(P)*
Shiraishi, Nao	153(P)
Shiraishi, Yuko	226(P)*, 247(P)*
Shova, Sanjida Rahman	258(OP)*
Shukla, Gargi	179(P)*, 263(P)*
Shukla, Mithi	225(P)*
Shushma	176(P)
Silva, Ana Paula Alves	176(P)*
Singh, Amool Ranjan	63(P), 123(OP), 171(P), 216(OP), 240(P)

*Presentation Author

KNL – Keynote Lecture; IT – Invited Talk; SC – Skill Class; IS – Invited Symposium
OS – Open Symposium; OP – Oral Presentation; P – Poster; VP - Virtual Presentation



Singh, Amool R.	105(OP), 208(OP)
Singh, Kumkum	108(OP)*
Singh, L Roshan	53(OP)
Singh, Prateek Kumar	105(OP)
Singh, Pratibha A.	86(OS)*
Singh, Ranjit	159 (P)*
Singh, RK Lenin	130(OP)
Singh, Samant	64(P)
Singh, Shweta	194(OP)
Singh, Soumya	190(OS)*
Singhal, Meghna	214(OP)*
Singhapol, Amornpun	115(OP)
Singla, Navneet	168(P)
Sinha, Shruti	63(P)*
Skjold, Solvei Harila	173(P)*
Somani, Preeti	241(P)
Son, Gaeun	66(P)
Soni, Smit	217(OP)
Spence, Susan H.	166(OP)*
Sriram, Nithya	187(OS)*, 201(OP)
Srivastava, Anamika	156(P)
Srivastava, Rani	245(P)
Stroian, Paula I.	163(P)*
Sudhir, Paulomi M	118(OP), 124(OP), 210(OP), 254(OS)*
Suga, Hidemichi	153(P)
Sultana, Nahida	98(OP)*
Suman, L.N.	55(OP)
Sumi, Michihisa	153(P)
Taguchi, Kayoko	237(P), 142(P)
Tajik, Aran	153(P)
Takahashi, Eriko	148(P), 249(VP)*
Takahashi, Takumi	249(VP)
Takahashi, Yasuko	150(P)
Takamatsu, Naoki	230(P)* , 35(IS)*
Takanashi, Rieko	142(P)
Takeda, Konoka	148(P)*
Takizawa, Ryu	234(P), 235(P), 236(P), 239(P)
Talukdar, Rita Rani	103(OP)
Tamura, Masaki	237(P)
Tangjitiporn, Thiraporn	115(OP)
Tangjittiporn, T.	100(OP)
Tania, Marzia Hoque	48(OP)

*Presentation Author

KNL – Keynote Lecture; IT – Invited Talk; SC – Skill Class; IS – Invited Symposium
OS – Open Symposium; OP – Oral Presentation; P – Poster; VP - Virtual Presentation



Tanjin, Tamima	189(OS)*
Tanobe, Kaho	145(P)
Tanoue, Hiroki	226(P), 247(P)
Tayama, Jun	145(P)
Tayyaba, Mubashra	111(OP)*
Terashima, Hitomi	157(P)
Thabassum K, Asma	178(P)*
Thakar, Jyoti	253(VP)*
Thakuria, Kashyapi	164(P)*, 165(P)
Thampy, Mareena	87(OS)*
Thennarasu,	118(OP)
Thomas, Christina	232(P)
Tibrewal, Sabhya	205(OP)*, 218(OP)*
Tigga, Aditi Usha	189(OS)*
Tiwari, Anu	176(P)
Tokas, Shivani	57(OP), 137(OP)
Tokuyama, Akihiro	157(P)
Toyomoto, Rie	153(P)
Tribe, Rachel	18 (IT)*
Tripathi, Richa	64(P)
Trivedi, Hitankshi M.	183(VP)*
Tsuchida, Keiko	9(IT)
Tujii, Masatsugu	166(P)
Uchida, Taro	146(P)
Uehara, Yoko	157(P)
Ul Huque, Akib	156(P), 195(OP), 199(OP)
Ularntinon, S.	100(OP)
Ularntinon, Sirirat	115(OP), 165(P)*
Umemoto, Ikue	32(IS)*, 157(P)*, 230(P)
Upreti, Sulav Raj	129(OP)*
Urao, Yuko	166(P), 227(P), 228(P)
Usmani, Mohammad Amir	127(OP)
Uwatok, Teruhisa	153(P)
Varsha	57(OP)*, 137(OP)*
Veale, David	7(KNL)*
Verma, Aparna	102(OP)*
Verma, Swati	208(OP)*
Verma, Vasundhra	129(OP)*
Vijay Sagar, K John	86(OS)*, 104(OP)
Vyas, Sameer	169(P)
Wadhwa, Aakriti	172(P)*
Wahyuni, Eka	96(OP)

*Presentation Author

KNL – Keynote Lecture; IT – Invited Talk; SC – Skill Class; IS – Invited Symposium
OS – Open Symposium; OP – Oral Presentation; P – Poster; VP - Virtual Presentation



Wallace, Vuokko	89(OP)
Wang, Chun	23(SC), 80(OS)*, 97(OP)
Warrier, Ambika	206(OP)
Watanabe, Takafumi	153(P)
Wheaton, Michael G.	173(P)
Wu, Sichu	23(SC)*
Yadav, Akanksha	139(OP)*
Yadav, Kapil	55(OP)
Yamaguchi, Honami	238(P)
Yamamoto, Hiromi	157(P)
Yanagi, Yuriko	61(P)*
Yanagida, Ayaka	144(P)
Yang, Jie	196(OP)
Yang, Leon	59(P)*
Yang, Yeji	167(P)*
Yassine, Ali	96(OP)
Yasukawa, Toru	145(P)*
Yi, Tiffanie Ong Ru	224(P)
Yokoyama, Yu	146(P)*
Yoshida, Kazufumi	153(P)
Yoshida, Tokiko	142(P), 237(P)
Yoshikawa, Chika	169(P)
Yoshinaga, Naoki	226(P), 247(P)
Yukako Nakagami	153(P)
Zakhmi, Tanya	168(P)*
Zaya, Aprem	232(P)
Zhang, J	152(P)*
Zhang, Ning	80(OS)*
Zhang, Yumin	97(OP)
Zixin, Chen	80(P)
Zulkefly, Nor Sheereen	46(OP)

*Presentation Author

KNL – Keynote Lecture; IT – Invited Talk; SC – Skill Class; IS – Invited Symposium
OS – Open Symposium; OP – Oral Presentation; P – Poster; VP - Virtual Presentation





8TH ASIAN CBT CONGRESS

THEME: Cognitive Behavioural Therapies Across Illness & Health
Advances, Challenges & Way Forward

OUR PARTNERS & SPONSORS





Organized by

*Indian Association for Cognitive Behaviour Therapy
All India Institute of Medical Sciences , New Delhi
Asian Cognitive Behaviour Therapy Association*