

JUNE - DECEMBER 2024

imagine

A MAGAZINE ON MENTAL HEALTH

STOP, FEEL, GO

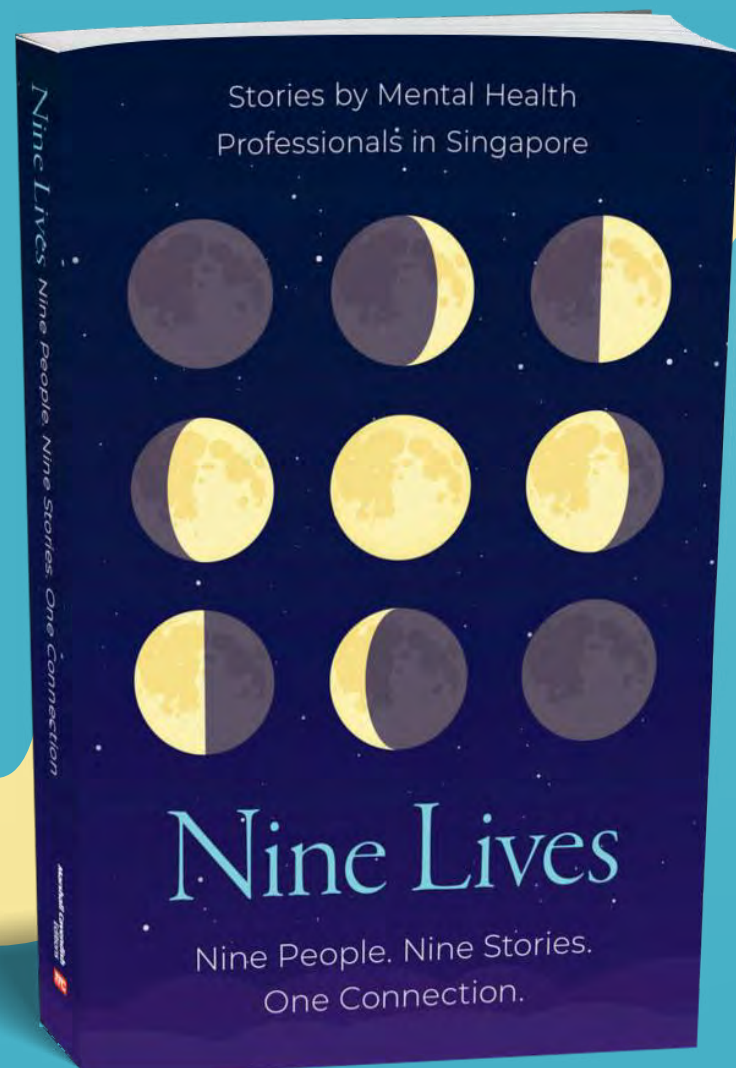
How to recognise and take charge of your emotions

JUST TEEN ANGST?

When adolescent
depression is mistaken
for growing pains



Written by healthcare professionals, this book presents NINE stories of resilience, recovery and joy – to remind readers that they are not alone.



Contributors include:

Dr Arvind Rajagopalan, Chermain Wong, Faith Wong, Dr Gillian Lim, Jessica Chan, Dr Lan Zhongzheng, Dr Lee Yu Wei, Lim Wee Onn, Dr Mok Yee Ming, Teresa Thia

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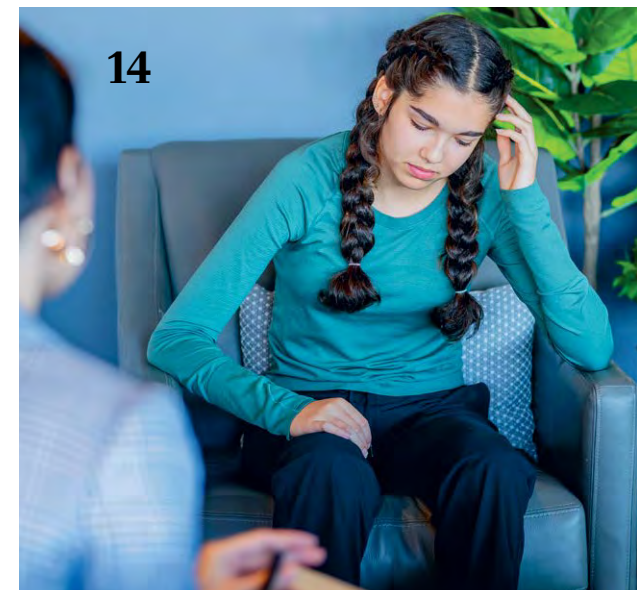
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“Learning to cope with stress, and the availability of social support, are important to protect against and minimise the severity of adolescent depression.”

DR DEVA PRIYA APPAN,
Consultant, Department of Developmental Psychiatry, IMH



CLOSING A CHAPTER BUT KEEPING THE HOPE ALIVE

When we launched *Imagine* in 2016, we had a simple goal: to make conversations about mental health a little easier, a little more accessible and a lot more relatable. Eight years and 23 issues later, it has been an incredible privilege to walk this journey with you, our readers. This issue is a significant milestone – it will be our last print edition amid changing consumer habits, as we go green and pivot online to our social media channels.

Over the years, *Imagine* has been a platform for mental health education through informative articles, stories of persons with lived experience or who work in the field, and other fascinating tidbits and tips on mental health. This issue is no different. We deep-dive into emotion regulation and adolescent depression – topics that are relevant, urgent and deeply personal to many of us. We also speak with Associate Professor Swapna Verma, Chairman Medical Board, IMH, & Programme Director, CHAT, to look back on the developments in Singapore's youth mental health landscape, particularly through the groundbreaking efforts of CHAT. Filmmaker Ms Diyana Amir shares how her family's experience with trauma inspired her award-winning short film, proving the power of storytelling for connection and healing.

While the end of this particular journey may feel bittersweet, we are excited about what lies ahead. Our social media platforms – which you may already be familiar with – allow us to bring mental health stories to you in a way that is timely, engaging and, most of all, at your fingertips. We will continue to share the resources, insights and bite-sized human-interest stories you have come to expect from *Imagine*. Do follow us on Facebook, Instagram, LinkedIn and YouTube so that we can keep reaching you where you are to share a new perspective, a practical tip or simply a moment of connection.

Thank you for your trust, your support and for being part of the *Imagine* community – a magazine shaped by, and for, those who care about mental health. We close this chapter on a note that the heart of our mental health outreach will always remain the same regardless of format: creating and holding a space for understanding, with our hope to bring stigma to an end.



As ever and always,
happy reading.

*the
editorial
team*

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MS JANET LIM

Senior Case Manager,
Medical Care Clinic,
IMH

Making the case for comprehensive CARE

By journeying with patients who grapple with both mental illness and chronic disease, this case manager supports them in achieving better overall health.

Text KEENAN PEREIRA // Photo KELVIN CHIA

What does a chronic condition like diabetes have to do with mental well-being? It might not seem apparent, but the two are deeply intertwined. "Chronic illnesses often bring stress stemming from lifestyle adjustments and worries about the future," says Ms Janet Lim, a Senior Case Manager with the Medical Care Clinic (MCC) at the Institute of Mental Health (IMH). "This can exacerbate underlying mental health conditions such as depression and anxiety."

The converse is also true: mental health conditions can disrupt daily functioning, and complicate adherence to treatment plans for pre-existing chronic illnesses. This, in turn, takes a toll on physical health.

Where both mental disorders and chronic diseases are present, managing them together is key for optimal outcomes. A care plan that integrates psychiatric and medical interventions is essential.

While IMH patients with chronic illnesses are encouraged to follow up with a polyclinic doctor or general practitioner near their

home for these conditions, they sometimes encounter difficulties in doing so. This is where the MCC, and Ms Lim, step in to assist with stabilising these patients' chronic conditions, before they are right-sited to the community or referred back to their IMH psychiatrist for continuity of care.

Keeping patients on track

Ms Lim's work involves coordinating such patients' psychiatric consultations with their medical appointments. At the MCC, patients see a physician for their chronic conditions such as diabetes, hypertension and high cholesterol on an outpatient basis.

As a case manager, she complements the MCC physician's work by assessing these patients' daily routines, and addressing their concerns about treatment options and lifestyle adjustments for better health management and treatment compliance.

To keep patients motivated on their treatment path, Ms Lim spends time understanding their problems and needs.

Factoring in cultural nuances and the patients' personal preferences, she guides them to make informed choices concerning their health. She empowers her patients by involving them in tailoring their treatment plans, and welcomes their feedback. She also updates them on critical

test results, and calls them to reschedule missed appointments.

Being able to improve her patients' quality of life has always brought Ms Lim joy. Although she joined IMH as a case manager in 2014, her public healthcare career began in 1997 as a staff nurse in a general hospital. In 2022, she took up a Specialist Diploma in Nursing (Diabetes Management and Education) to upskill herself, so she could provide more holistic care for patients with both mental illnesses and chronic diseases.

Her upgraded clinical knowledge and understanding of her patients have helped her intervene promptly when their health takes a turn for the worse. "Once, a patient's caregiver contacted me for an earlier appointment with a psychiatrist, suspecting that the symptoms of weakness, shortness of breath and inability to move due to a swollen leg were side effects of the patient's psychiatric medication," she recalls.

Based on her knowledge of the patient's condition, however, Ms Lim recommended that they call an ambulance immediately. "It turned out that the patient was experiencing cardiac problems. When I called them a few days later, the relative expressed gratitude for the prompt action I recommended," she adds.

Ms Lim often feels moved by the appreciation she receives from patients and their caregivers. "The encouragement from my bosses, MCC physicians and colleagues is a key motivator," she says. "This drives my dedication to providing the best possible care for my patients."

LOVE WELL!

SIP YOUR WAY TO

Sharper FOCUS



OTHER TEAS RICH IN BENEFITS

Beyond *hojicha*, here are a few other notable varieties and flavours:

> **Chinese oolong tea** is said to boost metabolism, support heart health, regulate blood sugar and enhance mental alertness.

> **Korean boricha** is a caffeine-free tea that is made from roasted barley, and it can be enjoyed hot or cold. It is known for several purported health benefits, including improved digestion.

> **Indian masala chai** is a traditional black tea brewed with milk and spices like cardamom, cinnamon and ginger, making it aromatic and invigorating.

>> Looking for a natural way to boost cognitive performance? Roasted green tea, known as *hojicha*, could be your answer.

A recent study in *Scientific Reports* suggests that even small amounts of *hojicha* – as well as its unroasted counterpart, traditional green tea – can have a significant impact on cognitive performance.

In the study, 20 healthy men in Japan, aged around 23, completed a five-minute mental arithmetic challenge six times in one day after drinking either hot water, green tea or *hojicha*. Those who drank

either green tea or *hojicha* performed better and felt less fatigued compared to those who drank water.

This process was repeated a month later. The researchers measured 11 different physiological responses and collected participants' self-evaluations on fatigue, stress and mental workload. "We found that aromatic stimulation of Japanese tea beverages has the potential to induce positive effects, enhance mental task performance, promote refreshment and alleviate feelings of fatigue," noted the study's authors.

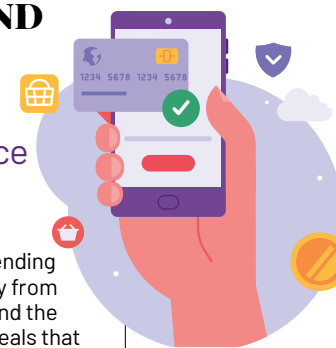
The aromatic compounds in green tea – particularly the roasted version – seemed to reduce physiological stress responses, helping to keep participants calm and focused. Despite these promising findings, other experts urged caution due to the study's limitations, including its narrow demographic, small sample size and task repetition design, which could affect the results.



CASHLESS... AND Reckless?

How digital payments influence your spending >

As society shifts towards cashless payments, our spending habits are changing. A study from the University of Adelaide and the University of Melbourne reveals that



electronic payments subtly encourage us to spend more.

Published in the *Journal of Retailing*, the research analysed 71 studies across 17 countries, and found a clear link between increased expenditure and digital payment methods such as credit cards, mobile payment apps and buy-now-pay-later services. When we tap our phones or cards, the absence of physical money seems to make us less mindful. "When using cash, people physically count and hand over notes and coins, making the act of spending more salient," explained researcher Lachlan Schomburgk.

Without the tactile experience of handling cash, it becomes easier to lose track of spending – particularly on luxury items that signal status. However, over time, this effect becomes weaker. Researchers attribute this to "habituation": as we get accustomed to cashless options, impulsive spending tends to decrease compared to when these methods were new.

The authors suggest that future research could explore how different cashless methods – including emerging technologies like cryptocurrencies – affect spending patterns.

THE PRESSURE TO BE 'PERFECT'

The relentless quest for perfection is taking a toll on parents. New research from Ohio State University reveals that pressure to be the "perfect" parent is causing burnout and worsening children's mental health. Surveying over 700 parents in mid-2023, the study found that 57 per cent reported burnout, which stems from internal and external pressures like feeling inadequate, perceived judgement and the struggle to balance responsibilities. Social media amplifies these pressures by inviting constant comparisons, which heightens expectations and stress for both parents and children.

The study also linked parental burnout to children's mental health issues. Burnt-out parents experience more depression, anxiety and stress, and their children also struggle behaviourally and emotionally, said co-author Dr Bernadette Melnyk. High burnout and harsh parenting practices correlate with more mental health challenges in children.

The researchers recommend positive parenting strategies that balance warmth with guidance. "Gently teach them consequences," said Dr Melnyk, adding that aiming to be positive, not perfect, is a much better goal. Self-care is essential, too. "Parents can't keep pouring from an empty cup," she noted. Modelling self-care can have a ripple effect, by encouraging children to adopt this value.



4 positive parenting strategies

- > **Focus on truly hearing your children** and building strong, meaningful relationships.
- > **Shift from negative to positive thoughts** to foster a healthier mindset.
- > **Set realistic goals** for yourself and your kids to reduce stress.
- > **Prioritise self-care alongside parenting responsibilities** to maintain overall family health.

OLD FRIENDS, NEW JITTERS

Psychologists from Australia's Simon Fraser University and England's University of Sussex found that reaching out to an old friend can be as nerve-racking as approaching a stranger. Published in *Nature Communications Psychology*, their study explores why people hesitate to rekindle past friendships, even when they wish to.

Social connections are crucial for happiness, and diverse friendships can boost well-being. Yet, many

friendships fade over time. Professors Lara Aknin and Gillian Sandstrom, who reconnected as old friends, wanted to understand what holds others back.

The researchers surveyed 2,500 participants across seven studies. Only about a third followed up on contacting an old friend,

despite having the desire and opportunity. Participants rated their willingness to reconnect similarly to starting a conversation with a stranger. Common concerns

included fear of rejection, awkwardness and guilt, while being too busy was rarely cited.

"Since participants hesitated to reach out to a stranger as much as someone they'd been close with, we drew inspiration from past research on talking to strangers, which found that practice made progress," explained Prof Sandstrom.

Her old friend, Prof Aknin, added: "Decades of research show that social relationships are key to happiness and meaning in life. We hope these findings encourage people to send that first message to someone they miss."



TO FEEL IS TO LIVE: Embracing every Emotion

Our emotions act as signals, communicating what we need in our lives. By learning how to recognise and manage them, we can create a more balanced and mentally healthy way of living.

Text EVELINE GAN in consultation with DR RIE KUBOTA, Senior Clinical Psychologist, Department of Psychology, IMH

Think of your emotions as messengers, each delivering a unique signal about what is going on inside you. Whether it is joy, anger or sadness, every feeling reveals something important about your needs, desires or boundaries. Emotion regulation is about tuning in to these signals – understanding what they communicate and responding appropriately.

“It is the ability to manage our emotions in healthy ways,” said Dr Rie Kubota, Senior Clinical Psychologist, Department of Psychology, Institute of Mental Health. “It involves recognising and understanding emotions accurately, and managing or modifying them effectively.”

This helps prevent emotions from becoming overwhelming, reducing the risk of mental health issues and stress-related physical problems. “Effective emotion regulation promotes emotional stability, leading to fewer mood swings and greater resilience when managing stressful or challenging situations,” Dr Kubota added.

When we manage our emotions well, life feels more balanced and within our control – and we experience a greater sense of emotional wholeness.



02 Attention: your emotions are speaking

No emotion is inherently “bad”, according to Dr Kubota. “All emotions serve a purpose,” she said, advising against categorising them as “positive” or “negative”. Instead, think of them as valuable information about your experiences and needs, which can, in turn, prompt you to take action when needed.

For instance, feeling angry when you are unfairly treated is normal and can even be useful, as it prompts you to take action, like standing up for yourself.

Anger might also indicate a blocked goal or a threat to someone you care about. Labelling anger as negative could lead to suppressing the emotion or blaming yourself for feeling it – neither of which is helpful in the long run.

For those who tend to suppress their emotions, Dr Kubota advised examining the reasons: Is

it due to societal expectations, upbringing or negative beliefs about emotions? Or maybe a fear of losing control or being vulnerable? She explained that

emotional detachment or numbness can often occur in people with a history of trauma.

While it is important to recognise and understand your emotions, Dr Kubota also cautioned against giving them too much power. When emotions dominate decision-making, they can cloud judgement and lead to impulsive or irrational choices. She suggested balancing emotional awareness with rational thinking for more effective decision-making.



03 Name it and tame it

Identifying which emotions you struggle with – and why – is the first step to better emotion regulation. The next time you are hit by an intense emotion, try these steps:

SIT WITH YOUR EMOTION > Practise noticing and naming how you feel – without judgement. Instead of using vague terms like “I’m upset”, try more specific ones like “angry”, “guilty” or “anxious”. This will help you better understand what you are feeling, and why.

PAY ATTENTION TO PHYSICAL SENSATIONS AND URGES > If you find it difficult to identify your emotions, listen to your body. Notice physical sensations or urges to act. For example, an increased heartbeat or the desire to avoid a situation might signal anxiety.

REFRAME YOUR THOUGHTS > Think about what triggered the emotion. Are your thoughts supported by facts, or are they your assumptions? Ask yourself if your emotional response fits the reality, and consider the potential consequences of acting on that emotion. Balancing emotion with logic can help you avoid impulsive decisions and see the situation more clearly.

PRESS ‘PAUSE’ > Start by calming yourself with deep breathing. Sit comfortably, breathe in slowly through your nose and let your abdomen expand. Hold for a count of four, then exhale through your mouth for six to eight counts. Repeat for several minutes.

You can also ground yourself by imagining a safe space and focusing on what you see, hear, smell and feel. As the emotion subsides, it becomes easier to reflect on your reactions. Slow breathing helps to calm your nervous system, and prepares your body to respond in a more regulated way.



01 The science behind emotion regulation

Certain parts of the brain are key to how we regulate emotions. For example, enhanced activity and connectivity between the prefrontal cortex and the amygdala are linked to better emotion regulation and mental health, Dr Kubota explained. The prefrontal cortex – located at the front of the brain – affects decision-making, behaviour, personality and impulse control. It allows us to think before reacting. Meanwhile, the amygdala – a major centre for processing emotions – is responsible for emotional memories and emotions such as fear, anger and anxiety. When these two brain regions work well together, emotions are managed more effectively.

Studies show that people who struggle with emotion regulation are more vulnerable to mental illnesses like anxiety and depression. They often experience intense and prolonged emotional reactions, which can lead to greater psychological distress, unhealthy behaviours like alcohol addiction and self-harm, and conflicts with others. Poor emotion regulation has also been linked to physical conditions such as chronic pain.

Emotional turmoil can spill over into daily life. “Consequently, some individuals struggle with occupational, academic

or social functioning, and may find it difficult to maintain relationships or employment, or perform at school or work,” Dr Kubota added.

Why do some people find it harder to manage their emotions? The answer often lies in factors like temperament, upbringing, life experiences and even culture. For example, Singapore’s high-pressure environment – marked by competitive education and a demanding work culture – and emphasis on avoiding conflict can sometimes challenge emotion regulation, said Dr Kubota.

04 Defusing the situation

Emotions can significantly impact interpersonal effectiveness, which is the ability to communicate, maintain relationships and assert your needs effectively. Difficult or complex interactions can trigger intense emotions such as anger and fear, which can interfere with your ability to handle the situation appropriately. What if you are faced with an interpersonal conflict, and emotions are running high? Dr Kubota suggests three ways to manage the situation:

VALIDATE THEIR FEELINGS >

Ensure that the person feels heard. Pay attention to what they are saying, and reflect their words without judgement. Observe their facial expressions and body language to get a clearer sense of how they are feeling, and use non-verbal cues such as nodding or maintaining an open body posture to show that you are listening.

PROBLEM-SOLVE TOGETHER >

Encourage a cooperative approach to find solutions that satisfy both parties. Identifying shared goals and interests can foster collaboration. If you are part of the issue, acknowledge their feelings and consider offering a sincere apology, if needed. However,



Listen attentively and reflect their words with understanding, ensuring they feel truly heard.

if their behaviour becomes unacceptable — for example, if they are aggressive — it is okay to set boundaries or suggest taking a break.

REMAIN CALM YOURSELF >

Managing your own emotions is key. Take deep breaths, stay calm and speak in a measured tone. Stick to the specific conflict at hand, and avoid getting defensive or being pulled into an argument, which will only escalate the situation.

“Effective emotion regulation promotes emotional stability, leading to fewer mood swings and greater resilience when managing stressful or challenging situations.”



DR RIE KUBOTA, Senior Clinical Psychologist, Department of Psychology, IMH

‘Untangling the mess in my head’

One woman’s journey to emotional healing.

As a teenager, Livia* often felt unmoored by intense emotions. Casual remarks about her appearance hurt deeply, making her feel worthless. These incidents were not isolated — she spent years wrestling with emotional turbulence and mood swings.

Now 31 and working as an engineer, Livia opened up about her struggles. “I found it very hard to trust, and if I did, I became clingy,” she said. “It was hard to have healthy relationships.” Even on good days, happiness felt fleeting. “I would think it was just a lucky day, not that I deserved happiness,” she said.

By 2016, Livia reached a breaking point, crying daily and feeling “exhausted with life”. Working in a male-dominated industry, dismissive and disrespectful behaviour from some co-workers made things worse. After seeking help at a polyclinic, Livia was referred to a psychiatrist and diagnosed with depression and post-traumatic stress disorder, along with traits of borderline personality disorder.

Medication and therapy became crucial in her recovery. “My psychiatrist and psychologist saved my life,” Livia said. “They didn’t just teach me techniques to regulate emotions, but helped me untangle the mess in my head.”

Through dialectical behaviour therapy and cognitive behaviour therapy, she learnt to balance her emotions and reframe negative thoughts. Techniques like checking the facts helped her determine whether her emotional reaction matched the reality of the situation.



She also practised radical acceptance to cope with difficult situations beyond her control, such as being unfairly blamed for someone else’s mistakes at work. “I don’t have to approve of the situation, but I accept that it happens,” she said. “It doesn’t mean that I cannot have a meaningful work life or that my work is useless.”

Today, Livia has a more positive outlook. “I’m not the most cheerful person, but I’m more optimistic and no longer have as much fear,” she said. “I have positive self-esteem now, which is awesome. Without professional help, life would have been much tougher.”

*Not her real name.

5 HABITS FOR A HEALTHIER EMOTIONAL LIFE



TAKE CARE OF YOUR MIND AND BODY > Getting enough sleep, eating well and exercising regularly can reduce emotional vulnerability, strengthen resilience and support overall well-being.

PRACTISE MINDFULNESS > Practise being fully present while engaging in activities such as deep breathing, walking or yoga. Make it a habit to notice — without judgement — your emotions, thoughts and physical sensations while remaining aware of your surroundings. What do you see, smell, taste and hear?

SHOW COMPASSION > Treat yourself with the same kindness you offer others. When things go wrong, avoid self-blame. Forgive yourself.

EMBRACE CHALLENGES > Life comes with ups and downs. Face your problems head-on, and remember your ability to bounce back from past struggles.

CONNECT WITH OTHERS > Build meaningful relationships with family and friends. Seek professional support when needed.



Meaningful relationships and the support of family and friends are important.

Giving Voice to youths

This leading figure at IMH reflects on Singapore's evolving landscape of mental health support for young people.

As told to KEENAN PEREIRA
Photo AIK CHEN



A/PROF SWAPNA VERMA

Chairman Medical Board, IMH, & Programme Director, CHAT

When CHAT began in 2009, proactive help-seeking among young people in Singapore was rare. Many exhibited early signs of mental distress, like behavioural changes, falling grades or mood shifts, but these were often dismissed. Without timely intervention, such issues may escalate into more serious mental health problems.

At that time, aside from school-based support offered by the Response, Early Intervention and Assessment in Community Mental Health (REACH) service for students in primary and secondary schools and junior colleges, youth-specific mental health services were otherwise scarce in Singapore. Support was generalised — young people were often seen in care settings that handled clients of all ages, limiting the specialised care they needed.

Stigma was a major roadblock. Many

youths feared being labelled, or worried that seeking mental health help would affect their future, including their career prospects. This fear was compounded by the misconception that mental health issues had to be severe to warrant professional attention.

BREAKING BARRIERS AND ADDRESSING NEW PRESSURES

Over the past 15 years, CHAT has helped to lower these barriers. By offering free, confidential assessments, we made early intervention more accessible. Involving young people in shaping the service ensured that it stayed relevant to their needs. Reaching them through social media, where they are most comfortable, has also been key. All these have contributed to a significant increase in help-seeking: in 2009, only 2 per cent of CHAT's clients

sought help by themselves; by 2023, that number rose to 85 per cent. Despite progress, the prevalence of mental illness among young people remains a concern. Youth is the peak age for the onset of many mental disorders. The 2016 Singapore Mental Health Study found that 21.6 per cent of young people aged 18 to 34 — roughly one in five — have experienced a mental disorder in their lifetime. Left untreated, these conditions can affect an individual's well-being, education and career.

Additionally, new pressures have emerged. The National Youth Mental Health Study (NYMHS) conducted by IMH in 2023 found that about one in three young people (30.6 per cent) aged between 15 and 35 years in Singapore reported experiencing severe or extremely severe symptoms of

depression, anxiety and/or stress. Those who experienced cyberbullying, had body shape concerns or excessive social media use were more likely to report these symptoms.

Stigma remains a stubborn challenge. Substantive efforts still need to be ploughed into advocacy and policy reform to grow support for and tackle hesitancy in help-seeking among youths. One example is whether job applications should continue to ask about mental health history — such practices often do more harm than good.

STRENGTHENING PROTECTIVE FACTORS

The NYMHS findings, however, also give us hope. The study showed that higher levels of resilience, perceived social support and self-esteem were significantly associated with a lower likelihood of severe or extremely severe symptoms of depression, anxiety

and/or stress in young people. This underscores the importance of strengthening these protective factors. Families, schools and communities all have a role to play in cultivating these mental health buffers.

The study also revealed that about two-thirds of youths with severe symptoms sought help, either informally, for example, from family and friends, or from professional services. This is a positive shift — young people are increasingly recognising the value of seeking help. However, among those who did not seek support, fears of judgement and concerns about confidentiality were among the main obstacles. Public education and policy changes are needed to address these fears and further reduce stigma. Raising awareness among educators, parents and youths themselves also remains essential to encourage proactive help-seeking.

THE ROAD AHEAD

Youth mental health is not just a local issue; it is a global concern. Our work has attracted international attention, and I was honoured to join the Lancet Psychiatry Commission, which is a global initiative dedicated to advancing youth mental health. This collaboration allowed us to share Singapore's best practices and also glean insights from around the world. Together with a CHAT youth ambassador, I contributed to discussions on service development and research

“Over the past 15 years, CHAT has helped to lower these barriers (to help-seeking). By offering free, confidential assessments, we made early intervention more accessible.”

aimed at improving youth mental health worldwide. These international exchanges are invaluable, and keep us aligned with best practices.

Looking ahead, technology will play a pivotal role. Online counselling and telehealth platforms offer the flexibility and anonymity young people crave to seek help comfortably. We are also exploring innovative research projects to better understand today's youths and develop targeted, evidence-based interventions that will make a lasting impact.

Ultimately, my hope is that Singapore's young people will grow up in a society where mental health is as accepted and normalised as physical health — where seeking help is seen as a sign of strength, not weakness. We have come a long way, but there is still much to be done. I remain optimistic, heartened by our progress and excited about the possibilities on the horizon.”

What is CHAT?

Previously known as the Community Health Assessment Team, CHAT was rebranded as the Centre of Excellence for Youth Mental Health in 2022, reflecting its expanded tertiary role in the youth mental health sector, and commitment to supporting young people.



MS DIYANA AMIR

25, Entertainment producer and filmmaker

RESILIENCE Made Reel

Puzzled as a child by her father's changed behaviour following a traumatic incident, this young filmmaker created an award-winning short film that retold her family's journey of healing.

Interview KOH YUEN LIN // Photos DIYANA AMIR

While many associate childhood with carefree joy, Ms Diyana Amir had to grow up quickly. She was all of three years old when her father, Mr Amir Husin, returned home a different man.

As an airline cabin crew member, Mr Amir was outgoing and cheerful by nature until 31 October 2000, when the flight he was on

crashed on a closed runway during take-off. While physically unscathed, Mr Amir was mentally scarred by the event.

Up until that point, Mr Amir had always been the "chill" parent Ms Diyana turned to for extra treats that her firm mother did not approve of. He was the fun dad who took her to Changi Beach to watch planes take off and land. Naturally, she was taken aback when he started giving her the cold shoulder or saying

no to things he usually agreed to. She also remembers her father's increasingly temperamental and reclusive behaviour.

Previously laid-back in manner, he became highly strung, triggered by seemingly insignificant things: the smell of gas burning on a stove, and the scent of frangipanis. Ms Diyana now understands that these were reminders of the explosion and the deaths, but as a young girl, his big



“Trauma is not something you get over like the flu — it’s a long road to recovery with ups and downs. But it is possible to face it with positivity and optimism.”

reactions to small things were bewildering.

“He used to soothe my baby brother, but after the incident, he would be frantic at the sound of crying,” she shares. “While I knew he wasn’t upset because of something I had done, it was still confusing to me as a child.”

Alongside her father’s medical treatment for post-traumatic stress disorder (PTSD), the family went through therapy together. The road to recovery was long and winding. Ms Diyana, now 25, recalls her father being sombre, volatile and withdrawn for a few years. Despite her disrupted childhood, she found strength in adversity. “There is a silver lining in every situation, if you allow yourself to see it,” she says.

RISING ABOVE CHAOS

Mr Amir’s state meant the family had to be extra vigilant about eliminating triggers that might set him off. Ms Diyana took on the role of the responsible sibling, looking after her younger brother and youngest sister. Despite missing out on playtime, she relished her duties as the big sister. Keeping busy thus became her coping mechanism to deal with the shock and confusion, and she developed a sense of responsibility.

Treading carefully at home also honed her emotional intelligence. Learning to observe her father’s mood before she approached him translated to her interactions outside the home. This trait became an asset when she discovered her passion for filmmaking in polytechnic. “Studying real-life characters is an important part of storytelling through films, and it comes naturally to me,” Ms Diyana shares.

Trying to understand her father’s condition from a young age also nurtured

empathy. “I realised early on that beneath the surface, many people could be facing difficulties and challenges,” she says. “I am always happy to lend a listening ear when anybody comes to me with their problems. I was often asked to mediate arguments in secondary school too,” she recalls with a chuckle.

“My childhood experiences shaped who I am,” Ms Diyana reflects. She sees her adverse childhood experience (ACE) as a prolonged episode of positive growth rather than a setback. Instead of lamenting a lost childhood, she is thankful for the strong family relationships forged through the difficult times. This is especially so with her mother, with whom she shared responsibilities from a young age.

Being with her father every step in his recovery also strengthened their bond. “Our relationship is better than ever,” she shares. “Lots of my peers in their 20s aren’t as close to their dads. But my dad and I share jokes, have open conversations and enjoy good food together. I also love simple moments such as listening to our favourite songs in the car when he drives me to work.”

FINDING A VOICE THROUGH THE LENS

Ms Diyana wants to share a message with those who have experienced ACEs: it is possible to emerge stronger and better from adversity. Graduating from Nanyang Technological University’s School of Art Design and Media in 2023, she drew upon her childhood experiences to create the short film, *Paper Planes, Don’t Always Soar*, for her final-year project. Told from the perspective of a 10-year-old girl, the film details her family’s trials, tribulations

and triumphs when her father was impacted by PTSD.

Initially a thesis project not meant for public screening, *Paper Planes, Don’t Always Soar* garnered attention and won various regional and international film awards. “The show resonated with many people, and made me realise that I am not alone in what I went through,” says Ms Diyana. “The film became a way to reach out to others who had experienced similar trauma and to tell them that, with resilience, they will see light at the end of the tunnel. Trauma is not something you get over like the flu — it’s a long road to recovery with ups and downs. But it is possible to face it with positivity and optimism.”

Having a tight-knit family network and supportive friends helped them pull through, but Ms Diyana also emphasises the importance of talking about one’s struggles. “Many individuals who have experienced ACEs keep to themselves because of the negative associations,” she observes. “While there are many more resources today — such as online chat groups for support and help — I hope society can be more open-minded towards those who went through ACEs, and listen to them without prejudice.”

Making the film was a cathartic exercise for Ms Diyana, who felt the retelling of her childhood lifted a heavy weight off her shoulders. Through it, she hopes to help others find a voice to share their experiences and discover the silver lining in their stories, too.

>>
Learn more about Ms Diyana’s short film at paperplanesfilm.com.



In 2021, Radha* and her husband found themselves perplexed by the behaviour of their daughter, Anita*. The then 14-year-old began losing interest in her studies and dance classes, which she had always enjoyed. Although she previously liked socialising, she now isolated herself from family and friends.

"She started getting angrier and throwing tantrums. She lost interest in so many things. Initially, I thought she was just being a teenager, and we were not very attentive," recalled Radha. "After two or three months, her form teacher called me and told me that she was self-harming. At that point, we realised we had to take her to the doctor."

Although mood swings are often seen as a normal part of adolescence, experts highlight that adolescent depression is not merely a phase of growing up, but a serious mental health disorder.

The condition causes persistent feelings of sadness, hopelessness and a loss of interest in activities the young person used to enjoy. At its most severe, it can lead to substance abuse and self-harm, and even attempts at suicide.

STATISTICS TELL THE STORY

Adolescent depression is more common than you may realise. About one in three young people aged 15 to 35 in Singapore reported experiencing severe or extremely severe symptoms of depression, anxiety and/or stress, according to the National Youth Mental Health Study conducted by the Institute of Mental Health (IMH) in 2023. While these symptoms do not necessarily indicate a disorder, the findings call for our attention.

"I started seeing everything as nothing," said Anita, now 17. "I couldn't shower for a long period of time, and I couldn't get myself to do things like



NOT A MINOR PROBLEM

Teenagers often have emotional ups and down, but for some, these mood swings and behavioural changes are symptomatic of a bigger issue.

Interview **NICHOLAS YONG**
in consultation with **DR DEVA PRIYA APPAN**,
CONSULTANT, DEPARTMENT OF
DEVELOPMENTAL PSYCHIATRY, IMH

brush my teeth or socialise with my friends. I found it really hard to pay attention in school or even go to school sometimes. A lot of the time, I was stuck in bed."

She added, "I was given sick leave a lot, because the doctors thought that it wasn't safe (for me) to go to school."



DR DEVA PRIYA APPAN, Consultant, Department of Developmental Psychiatry, IMH

UNDERSTANDING THEIR TURMOIL

Adolescent depression differs from adult depression in terms of symptoms, according to Dr Deva Priya Appan, Consultant, Department of Developmental Psychiatry, Institute of Mental Health (IMH). "Adolescents tend to exhibit more irritability, angry

outbursts and isolative behaviour whereas adults typically experience low moods," she said.

While the symptoms may vary, depressed individuals are usually affected in three main areas: mood, thinking and activity. They experience episodes of sadness and often have feelings of low self-worth. There may also be a range of physiological symptoms, such as fatigue, decreased sleep and changes in appetite.

"Typically, young people may feel useless, unable to effect change in their lives and hopeless about their future," said Dr Appan, who noted that this persistent state can be severe enough to prevent the individual from leading a normal life, and last every day for at least a fortnight.

“Early detection and intervention are critical, as recurrent episodes can increase the risk of long-term mental health issues.”

Left untreated, depression is often associated with poorer academic performance and problems with relationships. Dr Appan stressed that early detection and intervention are critical, as recurrent episodes can increase the risk of long-term mental health issues.

TRIGGERS AND TREATMENTS

Adolescent depression is a complex condition, but it is generally caused by a combination of environmental and genetic factors, said Dr Appan.

A family history of depression could predispose one to the condition, while environmental factors such as academic stress, traumatic life experiences and relationship problems could also increase the risk of depression. Resilience, or the ability to

bounce back from life's challenges, is also related to genetic makeup.

Treatment is administered in two ways: therapy sessions and medication. Psychotherapy – such as cognitive behavioural therapy or interpersonal therapy – helps adolescents learn coping skills, change negative thought patterns, and improve relationships, which can enhance mood management and overall well-being. Antidepressants are used in more severe cases, and under specialist supervision.

"Learning to cope with stress, and the availability of social support, are important to protect against and minimise the severity of the illness," said Dr Appan.

YOUNG ONES CAN REACH OUT TO THESE HOTLINES

- **Samaritans of Singapore (SOS)**
Tel: 1767 (24 hours)
CareText: 9151-1767
(WhatsApp; 24 hours)
- **Touchline by Touch Youth Services**
Tel: 1800-377-2252
(Monday to Friday, 9am to 6pm)
- **Tinkle Friend Helpline by Singapore Children's Society**
Tel: 1800-274-4788 (Monday to Friday, 2.30pm to 5pm)
- **Care Singapore Hear4U**
Tel: 6978-2728
(WhatsApp; Monday to Friday, 10am to 5pm)





FROM GREY DAYS TO BRIGHTER ONES

Three years on from her diagnosis, it has been a long road back for Anita with the help of therapy and medication, as well as the support of family, friends and teachers.

She is now coping better — she has found new hobbies and made new friends. It was not easy as she experienced side effects from her initial medication. However, she persevered and worked with her doctor to try other medications at different dosages over some time, until they found an effective dosage with minimal side effects. “Not all parts of my life have been restored because that’s the thing about depression — it takes things away from you,” said Anita, who has found a new perspective on life with the help of her therapist. “I tell myself: whatever’s

in my control, I can only change that. That’s something that keeps me going but when things aren’t in my control, I get really distressed.”

Spending time with those who make her laugh has also helped to stabilise her, Anita shared. “When you start loving yourself and being around

people who mean a lot to you, you automatically see life in colour and things seem less grey,” she said. “So having some love and gratitude for yourself and the people around you can really lift some weight off your shoulders.”

**Not their real names.*

PARENTING THROUGH TEENAGE DEPRESSION: RADHA’S STORY ▶

“As a parent, you have to be more patient and understanding, and you have to give (your child) a lot of your time. Otherwise, it’s going to be very difficult for the child. I see a lot of parents for whom avoiding the stigma is more important than their child’s well-being. Some parents don’t even like the idea of bringing their child to the psychiatrist or therapist, even though the child is suffering.

I see a lot of judgemental parents, too — once another kid is diagnosed with depression, they totally cut them (off). They don’t like their kids to have friends with depression.

I think even parents should go for therapy, because you will understand so many things. And join a support group because you can share and benefit from interacting with parents who have kids (with this condition).”



Q&A

ASK THE Experts

IMH clinicians answer your questions.

Q: I HAVE BEEN REFERRED FOR GROUP PSYCHOTHERAPY, AND AM WORRIED ABOUT SHARING WITH OTHERS INSTEAD OF JUST A THERAPIST.

What should I expect and how can I prepare for it? Will it feel awkward discussing my personal struggles with strangers? What are the advantages of group psychotherapy over individual sessions?

A: Group psychotherapy typically takes place in a cosy and safe environment, usually with six to eight participants. Sessions generally last around one to two hours, and may take place weekly. The total number of sessions largely depends on individual goals and the programme.

Led by two psychologists, each session includes therapy materials and facilitated discussions. Rules are laid out at the start of the first session to ensure confidentiality and respect among the participants.

It is normal to feel apprehensive when entering a group therapy environment. While participants are encouraged to share their experiences and offer their perspective on what others disclose within the safety of the group, they can take their time to warm up before doing so.

One benefit of group psychotherapy over individual therapy is that participants can support one another by discussing similar challenges. As they share their personal struggles, they discover new perspectives through fellow group members, and also learn and

reinforce coping skills. In these group interactions, participants gain better insight into their issues and can progress towards their therapy goals.

Committing to the group psychotherapy sessions and participating with an open mind are key to a fruitful experience. Give it a try, and if you have concerns at any point, raise them with your facilitating psychologists.

DR LEUNG HOI TING
Principal Clinical Psychologist,
Department of Psychology



Q: AS A FULL-TIME WORKING MOTHER AND WIFE WITH NO DOMESTIC SUPPORT,

I feel overwhelmed managing work and home, and caring for my young children and ageing parents. I am constantly tired and stressed. How can I maintain my well-being and prioritise appropriately to cope with these demands?

A: You have described a situation many parents face in modern-day Singapore. Your struggles may stem from deep-seated family values like filial piety, being a good wife and the desire to ensure your children grow up to be responsible, functioning individuals. Two key strategies might help:

▶ **Seek help from both within and outside the family.** Managing everything on your own can lead to burnout and leave you less effective. You, your children and your family may unknowingly suffer as a result. It is time to take a step back, reassess and consider discussing with your husband about domestic help or caregiving arrangements. Even your ageing parents may be able to lend a hand. Ask yourself:

what is stopping you from involving your husband and family in redistributing these tasks? If he does not chip in, an open conversation about shared responsibilities or seeking external support may help.

▶ **Prioritise your well-being.** Like the airplane analogy, you need to put on your oxygen mask first before helping others. Speaking up, asserting your needs and setting boundaries may help your husband and family understand how they can contribute. What is holding you back? Is it the belief that a good wife should not ask for help from her family? Reflect on these thoughts. Taking care of your well-being helps you to be the mother and caregiver you want to be.

MS GOH SONG ENG
Senior Medical Social Worker,
Department of Medical Social Work

HAVE A QUESTION FOR OUR EXPERTS? Write to us at enquiry@imh.com.sg.



A round-up of news and events centred on mental healthcare.

A MOBILE APP FOR CAREGIVERS OF PERSONS WITH DEMENTIA

Persons with dementia may display behavioural changes that stress caregivers. To address this, the Institute of Mental Health (IMH) and health tech provider Taggle developed the interactive Play2Care app. Using gamification, it teaches caregivers IMH's T.A.N.G.O communication strategy for managing difficult dementia-related behaviours, such as reversed sleep patterns, repeated food requests and agitation.

"Dementia often manifests as behavioural problems due to declining communication abilities," said Dr Yao Fengyuan, Senior Consultant and Chief, Department of Geriatric Psychiatry, IMH. "The behavioural issues are often an attempt to communicate unmet needs with their remaining cognitive abilities."

Localised scenarios and cognitive games enrich the app, which in a pilot test showed improvements in

caregivers' dementia knowledge and comfort levels in interacting with persons with dementia. "Traditional lectures are insufficient for training caregivers," said Ms Ong Xin Ling, Senior Occupational Therapist, IMH. "Play2Care allows caregivers to practise strategies at their own pace."

The app is available on Google Play and Apple's App Store.



The Play2Care app demonstrates how a caregiver can handle the challenging behaviours of a person with dementia.

WHAT IS T.A.N.G.O?

- **Tender approach:** Be reassuring in one's expressions and body language.
- **Acknowledge:** Validate emotions and unmet needs.
- **No challenging:** Avoid disputes; use gentle cues and prompts.
- **Get into simple conversation:** Use short sentences and offer clear choices.
- **Optimise environment:** Adapt surroundings with visual aids like calendars.

NEW HOPE FOR TREATMENT-RESISTANT DEPRESSION

IMH and the Yong Loo Lin School of Medicine at the National University of Singapore have launched two groundbreaking clinical trials to explore personalised transcranial magnetic stimulation (TMS) for treatment-resistant depression. Both pilots are separately funded by Temasek Foundation and the National Medical Research Council, each with a grant of S\$1 million.

Running from March 2024 to 2026, the trials are recruiting suitable individuals who have not achieved remission from major depressive disorder despite conventional treatment. Unlike standard TMS, personalised TMS uses functional MRI to tailor the treatment to each patient, which potentially improves outcomes significantly.



Singapore is the first in Southeast Asia to trial this personalised approach. The method is inspired by the Stanford Accelerated Intelligent Neuromodulation Therapy (SAINT) protocol, which saw an 80 per cent remission rate in American subjects.

These promising clinical trials offer a glimmer of hope to those struggling with treatment-resistant depression. Clinicians who wish to enquire about referring their patients may contact the IMH Neurostimulation Service at swc_clinic@imh.com.sg.

FIVE-YEAR MENTAL HEALTH CAMPAIGN KICKS OFF

In a big step towards mental health advocacy, TeleChoice International and the Woodbridge Hospital Charity Fund (WHCF) launched a five-year fundraising campaign on 2 October to promote mental health awareness, reduce stigma and improve mental health literacy.

The campaign began with two major events: a 152km Walk for Mental Health relay across Singapore, and the unveiling of a mental health pledge wall at IMH, setting a new record for the "Most Number of People Contributing to a Digital Leaf Montage".

To date, TeleChoice and its partners, including Samsung, Tech Data, Huawei, PW Connect and Aginode, have pledged S\$138,000 to the TeleChoice ESG Fund. IMH will use this Fund for environmental, social and governance (ESG) programmes advancing mental health education and sustainability.



This collaboration between TeleChoice and the WHCF is a pivotal step forward for mental health advocacy.

"Sustainability involves not just conserving resources, but also fostering social well-being," said TeleChoice President Pauline Wong. "Addressing mental health challenges is essential for creating resilient communities, which is a core aspect of sustainable development."

IMH CEO, Associate Professor Daniel Fung, added, "These initiatives serve as a testament to the power of corporate citizenship and social impact. They are crucial in our journey to destigmatise mental illness and foster a community that truly understands and supports mental health."

WISE STUDY SHOWS DROP IN PREVALENCE OF DEMENTIA

The second "Well-Being of the Singapore Elderly (WiSE)" study, led by IMH, revealed a decrease in the prevalence of dementia among Singaporeans aged 60 and above, dropping from 10 per cent in 2013 to 8.8 per cent in 2023. It also highlighted an improvement in the treatment gap, with undiagnosed cases falling from 70.6 per cent in the previous study to 51.5 per cent, showing more patients receiving care. Funded by the Ministry of Health and conducted from 2022 to 2023, this nationwide cross-sectional study involved 2,010 participants and caregivers.

Dementia is a major cause of disability in older adults, said principal investigator Professor Chong Siow Ann, Senior Consultant, Research Division and Department of Psychosis, IMH. "It not only affects the health and quality of life of those who have it, but also places significant physical, emotional and economic strain on families and caregivers."

Associate Professor Mythily Subramaniam, Assistant Chairman, Medical Board (Research), IMH, said that preventive efforts and targeted interventions, such as healthier lifestyles and stroke prevention, could have lowered the dementia prevalence.

IMH AND NNI SIGN MOU ON NEUROLOGY AND PSYCHIATRY COLLABORATION

IMH and the National Neuroscience Institute (NNI) signed a Memorandum of Understanding (MOU) on 29 August 2024 to work together in areas such as clinical care, research, advocacy, and education and community outreach.

The cross-cluster partnership aims to integrate expertise from neurology and psychiatry to benefit patients who require care from both specialties. This includes sharing resources, developing training materials and conducting joint research to strengthen clinical capabilities.



A/Prof Daniel Fung (left), CEO, IMH, and A/Prof Au Wing Lok, CEO, NNI.

MENTAL HEALTH LITERACY IMPROVES

More people in Singapore can now identify common mental health conditions, according to a second nationwide mental health literacy study led by IMH. Recognition rates rose from 42.3 per cent in 2014 to 58.9 per cent, with the latest survey conducted between 2022 and 2024.

The second "Mind Matters: A Study of Mental Health Literacy", follows up on IMH's first "Mind Matters" study in 2014. The scope of the current study has been expanded to include two new mental health conditions – depression with suicidality, and gambling disorder – in addition to the five conditions from the first study: dementia, depression, schizophrenia, alcohol abuse and obsessive-compulsive disorder.

Besides examining public knowledge and awareness of common mental health conditions, this nationwide cross-sectional survey also explored perceptions of these conditions, including associated stigma.

A total of 4,195 Singapore citizens and permanent residents aged 18 to 67 participated in the study, which revealed a significant improvement in stigma or negative perceptions towards people with mental health conditions since the first study.

"IMH and other agencies have been consistently working to improve the mental health literacy of the population," said Associate Professor Mythily Subramaniam, Co-investigator and Assistant Chairman, Medical Board (Research), IMH.

"The increased recognition should hopefully translate into a better understanding of their symptoms and a better ability to signpost people to the right care. The reduced stigma scores are a right step towards a more inclusive Singapore."



EXPERIENCING JAMAIS VU: When the familiar turns strange

We have all felt *déjà vu* before — that sense of reliving a moment as it unfolds. But have you heard of its lesser-known cousin?

Ever noticed a common word suddenly looking nonsensical, as though it was spelt wrongly? Or taken the train home without recognising landmarks you pass every day? That is *jamais vu* in action.

Meaning “never seen” in French, this psychological phenomenon is the opposite of *déjà vu*, which means “already seen”, explained Professor Christopher Moulin, a cognitive neuropsychology researcher at France’s Université Grenoble Alpes and lead author of a study on the subject. “It is the feeling that something is unreal or unusual, whilst at the same time knowing it is something you are very familiar with,” he told *Medical News Today*.

In the study, researchers induced *jamais vu* by asking participants to repeatedly write words. In one experiment, 94 undergraduates wrote 12 different words, with 70 per cent stopping after they felt the words started to look strange. In another experiment, researchers took a different approach by having participants copy the word “the” until over half of them felt peculiar and stopped, citing cognitive fatigue.

These brief *jamais vu* episodes — lasting seconds or minutes — can occur anywhere and at any time, even in healthy individuals. Although disorientating, most people return to their task after the feeling passes. The study found that participants often stopped writing due to a sense of strangeness. Descriptions ranged from “(the words) lose their

meaning the more you look at them” to feeling like “someone’s tricked me into thinking it’s (a word)”.

Although so little is known about *jamais vu*, its exact cause remains a mystery. This effect might stem from temporary disconnections between perception and memory, or involve the brain’s temporal lobe, which plays a significant role in memory. Stress or anxiety can trigger episodes by disrupting the brain’s ability to process familiar information. Sleep deprivation and fatigue can also make these moments more likely, as an exhausted brain may recall but not recognise. Additionally, neurological conditions like migraines and epilepsy, as well as psychological factors such as trauma and dissociative disorders have been associated with this effect.

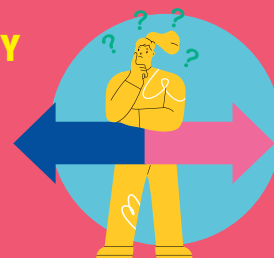
“*Jamais vu* illustrates how higher-level feelings and processes can become dissociated from perceptual processes like word reading or face recognition,” Prof Moulin explained. “In healthy populations, it’s fleeting. In delusions, it happens in a distressing and convincing manner. In our experiment, it happened after ‘over-processing’ a word until it became too automatic.”

Specialists in human memory, like Prof Moulin, believe that examining these fleeting moments of unfamiliarity can provide valuable insights into the brain’s complex inner workings, especially in memory disorders. Over time, such research may shed light on how we process the familiar — and the unfamiliar.

WHEN TO WORRY

Jamais vu is rare, but mostly brief and manageable. However, consult a healthcare professional if you experience:

- > **Frequent episodes**, especially if you cannot quickly recognise or return to a sense of familiarity after they occur.
- > **Existing medical conditions**, such as epilepsy, migraines or other neurological disorders.
- > **Mental health concerns** like chronic stress or anxiety.



RESOURCES AND USEFUL INFO

HELP IS A PHONE CALL AWAY



Mental Health Helpline

Manned by trained counsellors from IMH for those requiring advice on mental health issues.

Tel: 6389 2222 (24 hours)

Singapore Association for Mental Health (SAMH) Helpline

Provides information and assistance on mental health matters and psychosocial issues.

Tel: 1800-283-7019
(Monday to Friday, 9am to 6pm)

Dementia Helpline by Dementia Singapore

Provides information and assistance for persons with dementia.

Tel: 6377 0700
(Monday to Friday, 9am to 6pm and Saturday, 9am to 1pm)

Dementia InfoLine by Health Promotion Board

For advice and information on dementia-related queries (available in all 4 languages – English, Chinese, Malay and Tamil).

Tel: 1800-223-1123
(Monday to Friday, 8.30am to 5pm and Saturday, 8.30am to 1pm)

Samaritans of Singapore (SOS)

Provides confidential emotional support for those in crisis, thinking of suicide or affected by suicide.

Tel: 1767 (24 hours)
CareText: 9151-1767 (WhatsApp; 24 hours)

National Problem Gambling Helpline

Provides information and help for problem gamblers and their families.

Tel: 1800-6-668-668 (8am to 11pm daily)

Touchline by Touch Youth Services

Renders emotional support and practical advice to youth.

Tel: 1800-377-2252 (Monday to Friday, 9am to 6pm)

Tinkle Friend Helpline by Singapore Children’s Society

Provides support, advice and information to primary school children in distress, especially in situations when their parents or main caregivers are unavailable.

Tel: 1800-2744-788
(Monday to Friday, 2.30pm to 5pm)

Club HEAL

Helps persons with mental health issues to reintegrate back into the community.

Tel: 6899 3463
(Monday to Friday, 9am to 5pm)

Silver Ribbon

Supports persons with mental health issues and their families.

Tel: 6386 1928 (main line)
(Monday to Friday, 9am to 5pm)

Caregivers Alliance Limited

Supports caregivers of persons with mental health issues.

Tel: 6460 4400 (main line)
(Monday to Friday, 9am to 6pm)

IMH SERVICE DIRECTORY

INSTITUTE OF MENTAL HEALTH

Buangkok Green Medical Park
10 Buangkok View
Singapore 539747
General Enquiries 6389 2000
(24-hour hotline)
Appointment Line 6389 2200
(Monday to Friday, 8am – 6pm)
Email: imh_appt@imh.com.sg

CHILD GUIDANCE CLINIC SUNRISE WING

IMH, Block 3, Basement
Monday to Thursday 8am to 5.30pm
Friday 8am to 5pm

CHILD GUIDANCE CLINIC HEALTH PROMOTION BOARD BUILDING
3 Second Hospital Avenue #03-01
Singapore 168937

Monday to Thursday 8am to 5.30pm
Friday 8am to 5pm

CLINIC B

IMH, Level 1
Monday to Thursday 8am to 5.30pm
Friday 8am to 5pm

SAYANG WELLNESS CENTRE CLINIC (for non-subsidised patients)

IMH, Level 2
Monday to Thursday 8am to 5.30pm
Friday 8am to 5pm

COMMUNITY WELLNESS CLINIC, QUEENSTOWN

580 Stirling Road, Level 4,
Singapore 148958
Monday, Tuesday, Thursday
8am to 5.30pm

Wednesday 8am to 12.30pm
Friday 8am to 5pm

COMMUNITY WELLNESS CLINIC, GEYLANG

21 Geylang East Central, Level 4
Singapore 389707
Monday, Tuesday, Thursday,
Friday 8am to 5pm
Wednesday 8am to 12.30pm

NATIONAL ADDICTIONS MANAGEMENT SERVICE (NAMS) CLINIC

IMH, Block 9 Basement
Monday to Thursday
8am to 5pm
Friday 8am to 4.30pm

Mindful Dialogues is back for Season 2!

My Family Is Toxic

Psychotherapy For
First-timers

From Addiction To
Advocacy

Is My Kid
Really Okay?


**More experts, more stories.
Let's get real about mental health.**

Why do people use labels like toxic? How do I know if therapy is working for me? Do addicts deserve empathy? Am I adding to my child's stress?

In the second season of the Mindful Dialogues podcast, we dive deep into the topics that you asked us about: family dynamics, psychotherapy for first-timers, addiction and youth mental health.

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