

plan developers and society at large) for effective user-based changes and implementation of sustainable solutions.

Disclosure of Interest: None Declared

Precision Psychiatry

O041

Optimizing Workplace Digital Mental Health Interventions: A Comprehensive Framework Based on Bayesian Meta-Analysis and Meta-Regression

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Introduction: Digital mental health interventions have gained prominence as accessible and cost-effective solutions in workplace settings. However, our previous meta-analysis revealed a concerning trend: despite advancements in technology, the effectiveness of these interventions has not improved over time. This stagnation may be attributed to the significant and ongoing heterogeneity among interventions which indicates both variation in both sample and the intervention. We do not know which therapeutic approaches, design aspects or intervention features enhance efficacy.

Objectives: We use a Bayesian meta-regression of an updated systematic review to develop a comprehensive framework to guide the design, development, and evaluation of workplace digital mental health interventions. By addressing the variability in intervention approaches and design and leveraging evidence-based practices, this framework seeks to enhance the quality and effectiveness of digital solutions for employee mental health.

Methods: A systematic literature review was conducted to identify randomized controlled trials of employee based digital mental health interventions. Eligible studies were assessed based on specific criteria, including participant characteristics, intervention characteristics, and outcome measures. Data extraction and coding were performed, followed by a Bayesian meta-analysis approach. This method allowed for a more nuanced evaluation of the effectiveness of various intervention features and designs, accounting for uncertainty and prior knowledge in the field.

Results: The review identified 95 interventions involving approximately ~25,000 participants. The Bayesian meta-analysis confirmed small positive effects in reducing mental ill-health symptoms. Both sample and intervention characteristics contributed to heterogeneity across studies. Stress management and mindfulness interventions, particularly those designed with input from mental health experts, demonstrated more efficacy than CBT based approaches. Several intervention features, such as videos, feedback scores, and reminder texts, were associated with positive mental health outcomes.

Conclusions: This review provides valuable insights into the optimal design and development of workplace digital mental health interventions. The identified framework and evidence-based practices offer guidance for developers to create effective interventions that address the heterogeneity within studies. Importantly, this framework has the potential to serve as a robust evidence base for

app designers, enabling them to create more effective, personalised and engaging mental health applications.

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Promotion of Mental Health

O042

Scrolling for Change: Using Instagram to Disseminate Evidence-Based Brief Video Interventions to Empower Childhood Trauma Survivors

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Introduction: Childhood trauma (CT), especially experiences of abuse and/or neglect, is highly prevalent. Although CT significantly impacts mental health, those who experience it often avoid seeking treatment. Stigma –negative beliefs surrounding mental-health and trauma, is a primary obstacle to seeking care. We recently developed and demonstrated the efficacy of a brief video intervention designed to reduce stigma and increase openness to mental health care among CT survivors. This intervention was tested in a controlled environment (crowdsourcing platforms) to ensure that broader dissemination would cause no harm. Given the central role social media plays in the lives of youth, it is crucial to explore how it can be leveraged to deliver evidence-based mental health interventions effectively.

Objectives: The current study aimed to test the feasibility and acceptability of delivering this evidence-based intervention via social media, specifically Instagram. We hypothesized that the intervention would be both feasible (demonstrating high reach) and acceptable, generating better social media engagement metrics – such as higher link clicks and lower recruitment cost-per-click (CPC) rates, which indicate the intervention's cost-effectiveness, compared to the control video.

Methods: An eight-day Instagram campaign in February 2024 targeted U.S. youth aged 18-24. The campaign featured a 60-second personal story video, previously shown to reduce stigma among CT survivors, and a psycho-educational control video providing generic mental health facts, lacking social-contact elements. We assessed the campaign's total cost-effectiveness and key social media engagement metrics: Impressions (number of times the video was displayed), reach (number of distinct viewers), link clicks (engagement with treatment resources), and recruitment cost-per-click (CPC).

Results: The campaign generated 628,000 impressions, reached 209,000 Instagram users, and resulted in 4,015 link clicks, indicating its feasibility. The intervention video outperformed the control video in all measures, achieving 2,062 link clicks with a CPC of \$0.79, compared to 1,953 link clicks and a CPC of \$0.84 for the control group.

Conclusions: The findings suggest that Instagram can effectively disseminate cost-effective interventions, potentially improving attitudes about CT and encouraging youth to seek help.

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