

and graphic symbols. A survey was conducted among 50 people of both sexes, aged 17-58 living in social welfare institutions. 56% of them had a diagnosis of intellectual disability, 18% - Autism, 26% - Schizophrenia. An algorithm for preparing and including respondents in the study was developed, consisting of several components (Establishing primary contact, Determining the preferred means of communication, Determining the ability to understand and use oral speech, Determining the ability to understand and use gestures, images and symbols, written speech).

**Results:** 92% of people completed the full study. 4 respondents withdrew from the experiment due to their mental state (psychosis, passivity, profound intellectual disability, fatigue). Despite successfully completing the preparatory stage, 74% managed to obtain full results.

**Conclusions:** The study made it possible to identify potential opportunities for using communication tools, analyze barriers in communication with others, and develop personal recommendations for using AAC, which will undoubtedly improve the quality of life of a person with mental disabilities.

**Disclosure of Interest:** None Declared

## EPP513

### Clients Mixed Experiences of Receiving Job Support and Getting a Job When Participating in Individual Placement and Support in Norway

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**Introduction:** People with severe mental illness (SMI) view employment as central to their recovery process, principally when work task is experienced as meaningful, manageable, and comprehensible. However, unemployment rates remain extremely high among people with SMI, especially those diagnosed with schizophrenia. The costs are high: significant numbers of people are at risk of loss of life's purpose, social isolation, poverty, and even suicide. Internationally, there is a knowledge gap of lived experience of receiving IPS in a job development and working phase. We need to know more about those who do not get or stay in a job. Correspondingly, in a national context more knowledge is needed about mainstream ESs' practices from an IPS client's perspective.

**Objectives:** Thus, the aim of this study was to explore clients' experiences of receiving job support from employment specialists (ESs) working with individual placement and support (IPS) in Norway. IPS is developed to help people with severe mental illness (SMI) into competitive employment as an integral component of mental health services.

**Methods:** Using a hermeneutic phenomenological methodology, this study comprises individual semi-structured interviews with ten participants engaged in IPS at two districts psychiatric centers. Data analysis was conducted according to systematic text condensation.

**Results:** Three themes emerged: (1) ES—a door opener? (2) Striving to sidestep a “spider web” of triggers at and away from work; and (3) Calling for a safer route.

**Conclusions:** This study highlights the importance of ESs offering IPS clients' opportunities to try out diverse jobs and focusing more on assessing the work environment in the jobs they place people into. Our findings imply that ESs should spend more time on building a good working alliance with both clients and employers, and pay more attention on understanding individuals' vocational capacities and support needs at the worksite. The ES training should focus not simply on the technical processes of job development and placement, but more directly on empowering clients to stay focused on their vocational ambitions and prospects. The salutogenic model of health can help ESs to analyze whether clients experience workplaces as meaningful, manageable, and comprehensible.

**Disclosure of Interest:** None Declared

## EPP514

### Study of a group of infants with risks of hearing impairment and mental difficulties

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**Introduction:** One of the little-studied nosologies with severe delay in psychomotor development in the first year of life is children with risks of damage to the auditory analyzer, which requires the development of an adapted method for diagnosing impaired auditory function and taking into account some external factors that do not depend on the state of the child's auditory function.

**Objectives:** to study the characteristics of the auditory function in infants at risk for hearing impairment with delayed psychomotor development.

**Methods:** 60 children (4-11 months) with suspected hearing loss were examined (Federal State Budgetary Scientific Institution “Institute of Correctional Pedagogics”); interview with parents; psychiatric and pedagogical examination.

**Results:** Three groups of children were identified depending on the level of psychomotor development (a level close to the norm, with a slight delay of 1-3 months, with a significant delay - from 4 months):

*The first group (34%)* included children admitted with suspected hearing loss, with a level of psychomotor development close to the norm, without concomitant developmental disorders. All children in this group were found to have significant and minor hearing loss. In two children, the hearing condition (according to the better hearing ear) was assessed as normal with atresia of the auditory canal on one side.

*The second group (50%)* consisted of children with suspected hearing loss, whose psychomotor development was delayed by 1-3 months. Most of them had significant hearing loss. In two children, the suspicion of hearing loss was not confirmed.

*The third group (16%)* included children with suspected hearing loss with a significant delay in psychomotor development for more

than 4 months. Half of them (8%) had disharmonious development. Most had significant hearing loss.

**Conclusions:** given that each group included children with significant hearing loss and deafness, it became obvious that their psychomotor development level is independent of their hearing status. The identified risks of sensory impairments combined with a pronounced delay in psychomotor development in the first year of life necessitate a search for markers of these disorders, and above all, factors and conditions that affect their manifestation and the dynamics of psychomotor development in children in the first year of life; presumably, this may be the child's social environment.

**Disclosure of Interest:** None Declared

## EPP515

### A program to reduce self-stigma in patients with endogenous psychiatric disorders

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**Introduction:** Stigmatization and self-stigmatization remains an actual problem for patients with endogenous mental illnesses, as it is an obstacle to seeking psychiatric help. Taking this into account, it is necessary to develop effective psychosocial interventions aimed at reducing self-stigmatization and improving patients' integration into society.

**Objectives:** To identify the features of self-stigmatization in patients with schizophrenic spectrum disorders and, taking into account these features, to develop a program to reduce it.

**Methods:** 30 patients with schizophrenic spectrum disorders (F20, F23, F25 according to ICD-10) were included in the study. The average duration of the disease was  $13.5 \pm 3.2$  years. Among them, 14 were males, 16 were females, and the median age of the patients was  $42.21 \pm 10.36$  years. To assess the severity of self-stigmatization and to determine its components, the "Questionnaire for assessing the phenomenon of self-stigmatization in psychiatric patients" (Yastrebov V.S., Mikhailova I.I., Yenikolopov S.N. et al., 2005) was used.

**Results:** A rather high general level of self-stigmatization ( $1.20 \pm 0.57$  points) was revealed in the studied patients, exceeding the average indices according to the mentioned questionnaire. The most pronounced were the indicators on the following scales: "Overestimation of inner activity" ( $1.61 \pm 0.67$  points); "Overestimation of self-actualization" ( $1.48 \pm 0.78$  points); "Willingness to distance from mentally ill patients in the social sphere" ( $1.44 \pm 0.72$  points); "Violation of self-identity" ( $1.17 \pm 0.59$  points). Taking into account the identified disorders, a program including psychoeducation, as well as art-therapeutic training based on the approach of Z. Russinova et al. "Anti-stigma photovoice Intervention" (2014) was developed and adapted for the Russian population. The psychoeducation included three sessions where the manifestations of mental disorders, their treatment, forms of psychiatric care, issues of stigmatization and its overcoming were discussed. The training included six sessions discussing the following topics: "My daily life", "Health and illness", "Me and others", "Accepting help and giving help", "My achievements and my possibilities", and "The next chapter of my life". Participants provided pictures according to the session topic and discussed personal experiences, their

emotions and feelings. The sessions were held in a closed group, the number of participants from 8 to 12 people, and the duration of the session was 90 minutes.

**Conclusions:** The developed program contributed to the identification of resources that help in overcoming the disease and reducing self-stigma. The program can be used for patients in the initial stages of the disease and with a long-term course of the disease.

**Disclosure of Interest:** None Declared

## Schizophrenia and Other Psychotic Disorders

## EPP517

### The association of familial factors with drug treatment compliance in psychotic disorders in adolescents and young adults: a follow-up study of former adolescent inpatients

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**Introduction:** Schizophrenia and other psychotic disorders have a high social and economic cost. Antipsychotic drugs are the main approach to schizophrenia treatment. Drug adherence can be assessed with the Medication Possession Ratio (MPR), which means the days covered by the drugs purchased / 1 year.

**Objectives:** The aim of this study was to investigate the effect of primary family factors and adverse childhood experiences (ACEs) on antipsychotic MPR among patients with schizophrenia spectrum disorder (SSD). Furthermore, we analyzed long-acting injectable antipsychotics (LAIs) and mood stabilizers separately.

**Methods:** We had access to a database of former adolescent psychiatric inpatients (n=508) treated during the years 2001-2006 in Oulu university hospital, Finland. Participants were followed for SSD diagnosis via National care register for healthcare (CRHC) and physician-prescribed antipsychotic drug purchases via Social Insurance Institute (SII) register up to June 2023.

**Results:** The participants using clozapine (OR 5.26, 95%CI 1.79-15.39) or mood stabilizers (OR 5.34, 95%CI 1.37-20.83) were significantly more likely to have MPR > 80% compared to participants using other antipsychotics. Sibling position, the size of primary family or ACEs did not associate with MPR.

**Conclusions:** Clozapine and mood stabilizers increased the likelihood of higher antipsychotic MPRs among former adolescent psychiatric inpatients having SSD.

**Disclosure of Interest:** None Declared

## EPP518

### No sex-related differences in CGI-S score reductions in adult patients with acutely exacerbated schizophrenia treated with Risperidone ISM

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