of participant dropouts differ across different treatment conditions and is considered a significant challenge to internal validity.
Objectives: We aimed at systematically review and meta-analyse differential attrition of digital mental health interventions in the workplace setting.
Methods: On January 2, 2022, we performed a search in the following electronic databases: PubMed, Scopus, and Web of Science Core. We utilized a combination of terms from five distinct areas, namely mental health, intervention, workplace, implementation, and study design. The study encompassed adult employees who took part in a randomized control trial aimed at preventing mental health issues in the workplace through an online intervention. A team of six reviewers collaborated on the study selection process, while two independent researchers conducted the data extraction for the selected studies. We performed a meta-analysis of the log-transformed relative attrition rates of the included studies using a random-effects model with limited maximum-likelihood (REML) estimation to account for the degree of heterogeneity.
Results: A total of 19 studies were included in the meta-analysis. For baseline to post-intervention, the average total attrition was 26.27% (SD = 21.16%, range = 0 – 66.3%) and the random effects model revealed a higher attrition rate in the intervention group compared to the control group, with a pooled risk ratio of 1.05 (95% CI: 1.01 - 1.10, p = .014). For baseline to follow-up measurement the average total attrition was 27.71% (SD = 20.80%, range = 0 – 67.78%), however, in this case the random effects model did not indicate a higher attrition in the intervention group when compared to the control group (pooled risk ratio = 1.05, 95% CI: 0.98 – 1.12, p = .183).
Conclusions: There is an indication of higher attrition in the intervention group as compared to the control group in occupational e-mental health interventions from baseline to post-intervention, however this does not seem to be the case for baseline to follow-up attrition. These results should be taken into account in the design process of studies and statistical analyses should be adapted to counteract the bias that could result from differential attrition.

Disclosure of Interest: None Declared

EPP0120

University students' perspectives towards digital mental health: a qualitative analysis of interviews from the cross-country 'CAMPUS study'

I. Riboldi[1], A. Calabrese[1], S. Piacenti[1], C. A. Capogrosso[1], S. Lucini Paioni[1]*, F. Bartoli[1], G. Carrà[1,2], J. Armes[3], C. Taylor[3] and C. Crocamo[1]

[1]Department of Medicine and Surgery, University of Milano-Bicocca, Monza, Italy; [2]Division of Psychiatry, University College London, London and [3]Faculty of Health and Medical Sciences, School of Health and Sciences, University of Surrey, Guildford, United Kingdom
*Corresponding author.
doi: 10.1192/j.eurpsy.2024.339

Introduction: Poor mental health of university students is a growing concern for public health. Indeed, academic settings may exacerbate students' vulnerability to mental health issues. Nonetheless, university students are often unable to seek mental health support due to barriers, at both individual and organisational level. Digital technologies are proved to be effective in collecting health-related information and in managing psychological distress, representing useful instruments to tackle mental health needs, especially considering their accessibility and cost-effectiveness.
Objectives: Although digital tools are recognised to be useful for mental health support, university students' opinions and experiences related to such interventions are still to be explored. In this qualitative research, we aimed to address this gap in the scientific literature.
Methods: Data were drawn from "the CAMPUS study", which longitudinally assesses students' mental health at the University of Milano-Bicocca (Italy) and the University of Surrey (United Kingdom). We performed detailed interviews and analysed the main themes of the transcripts. We also performed a cross-cultural comparison between Italy and the United Kingdom.
Results: Across 33 interviews, five themes were identified, and an explanatory model was developed. From the students' perspective, social media, podcasts, and apps could be sources of significant mental health content. On the one hand, students recognised wide availability and anonymity as advantages that make digital technologies suitable for primary to tertiary prevention, to reduce mental health stigma, and as an extension of face-to-face interventions. On the other hand, perceived disadvantages were lower efficacy compared to in-person approaches, lack of personalisation, and difficulties in engagement. Students' opinions and perspectives could be widely influenced by cultural and individual background.
Conclusions: Digital tools may be an effective option to address mental health needs of university students. Since face-to-face contact remains essential, digital interventions should be integrated with in-person ones, in order to offer a multi-modal approach to mental well-being.

Disclosure of Interest: None Declared

EPP0122

Advancing schizophrenia care: Ongoing Study of a Mobile Application for Personalized Support

E. Vass[1], Á. Szőke[2], J. Réthelyi[1], Z. Unoka[1], L. Hermán[1]*, L. Morvai[1], G. Csukly[1], G. Strausz[3], B. Pataki[3], B. Orbán-Szigeti[1], S. Blénesi[4] and K. Farkas[1]

[1]Department of Psychiatry and Psychotherapy, Semmelweis University; [2]Budapest University of Technology and Economics, Budapest, Hungary; [3]Dept. of Measurement and Information Systems, Budapest University of Technology and Economics and [4]Faculty of Medicine, Semmelweis University, Budapest, Hungary
*Corresponding author.
doi: 10.1192/j.eurpsy.2024.340

Introduction: Psychiatric care faces a significant challenge in the regular monitoring of patient states, predicting relapses, and ensuring treatment adherence. To address this, we aim to develop a mobile application tailored to individual patient needs. This application will revolutionize mental health care by offering real-time monitoring, education, evidence-based interventions, and enhanced communication between patients and clinicians.
Objectives: This ongoing study seeks to develop and evaluate a mobile application for individuals with schizophrenia spectrum

disorders, aiming to transform personalized mental health care by addressing critical challenges in psychiatric care.
Methods: The study follows a multi-phase approach, incorporating prototype development, a proof-of-concept trial, and a Randomized Controlled Efficacy Study (RCT). Each phase is informed by iterative stakeholder feedback, ensuring responsiveness to real-world needs and experiences. The research was approved by the Semmelweis University Regional and Institutional Committee of Science and Research Ethics (SE RKEB: 85/2023).
Results: In the pilot phase, we have effectively tracked the daily well-being of participating patients through interactive activities and structured questionnaires. Our experiences in this phase promise to offer valuable insights for the psychiatric community, shedding light on the potential of personalized mental health care interventions.
Conclusions: This ongoing study represents a pivotal step towards redefining interventions for individuals with schizophrenia spectrum disorders. Early results signal a transformative potential in enhancing symptom management. As the study advances, deeper insights will emerge, emphasizing the profound impact of leveraging mobile technology in personalized mental health care.

Disclosure of Interest: None Declared

EPP0123

Emotion Regulation and Physiological Reactivity in the Parent-Child Relationship: A Preliminary Study of an Online Attachment-Based Program for Parents of Preadolescents with Behavioral Disorders

M. Tironi[1]*, S. Charpentier Mora[1] and F. Bizzi[1]
[1]University of Genoa, Genoa, Italy
*Corresponding author.
doi: 10.1192/j.eurpsy.2024.341

Introduction: Behavioral disorders have been defined as a "health crisis" of modern times that has a significant impact on the parent-child relationship. In this scenario, the emotional regulation (ER) of each partner plays a central role and serves a protective factor, configuring as an area to intervene. The Connect Parent Group, an attachment-based intervention for parents, has shown evidence of effectiveness. However, its online version (e-Connect) has not yet garnered specific evidence related to emotional and physiological regulation in parents and preadolescents.
Objectives: This study aimed to explore changes in the short and medium term regarding ER abilities - both self-reported and measured through physiological indices - in parents and preadolescents with behavioral disorders, building upon initial findings from an online parenting intervention.
Methods: 28 parents (82.1% mothers, 17.9% fathers, M_age = 47.48, SD = 4.73) and their 28 preadolescents with behavioral disorders (M_age = 11.22 years, SD = 2.69, 35.7% girls) were recruited from child neuropsychiatry services in Northern Italy and subsequently took part in the pilot study. They were assessed at three time points: before intervention (T1), one months after the intervention (T2) and at 6-months follow-up (T3). ER were assessed with a multimethod approach: parents and children completed a self-report questionnaire (i.e., Difficulties in Emotion Regulation Scale and How I Feel, respectively) and then they interact during a stress-task in which physiological parameters (i.e., Galvanic Skin Response, GSR; Heart Rate/Beat per Minute, BPM) have been measured.
Results: Regarding self-reported ER, mixed-effects regression models showed an improvement in parent emotion dysregulation between T1 and T3 (p=0.004), a decrease in preadolescents' negative emotions (p=.012) between T1 and T2 and a lower emotion intensity in preadolescents between the three-time points (p=.003). Regarding physiological ER, the two overall models of GSR and BPM were not significant for both parents and children. Yet GSR correlations within three-time points were positive and significant for children (T1-T2: r=.58; T1-T3: r=.68) but not for parents, while BPM correlations between T1 and T2 were significant for parents (r=.49) but not for children.
Conclusions: The online attachment-based parenting program appears to have contributed to a reduction in emotional dysregulation in parents and preadolescents, which seems to persist to some extent in the medium term. The non-significant results at the physiological level may suggest that changes reported by parents and children through self-report questionnaires do not align with changes in the physiological response to interpersonal stress experienced after an online intervention. Clinical and research implications will be discussed.

Disclosure of Interest: None Declared

Forensic Psychiatry

EPP0126

Aggression management of criminal offenders in prison setting

G. Nikolić[1]*, N. M. Stojanović[2], J. Branković[3], S. Tošić Golubović[4], O. Žikić[1] and J. Kostić[1]
[1]Department of psychiatry; [2]Department of Physiology, Faculty of Medicine; [3]Daily hospital, Center for mental health protection and [4]Clinic for Psychiatry, Faculty of Medicine, Niš, Serbia
*Corresponding author.
doi: 10.1192/j.eurpsy.2024.342

Introduction: A new approach of social therapy for criminal offenders was applied in Penalty Facility in Niš, Serbia. It is based on three month peer-training focusing on recognizing of triggers for anger, understanding emotional manifestation and learning socially acceptable ways of anger expression.
Objectives: To estimate how the impact of pear-based training influences the level of agression of criminal offenders in prison settings.
Methods: One hander and six prisoners were randomly assigned to program. The six previously educated inmates trained the participants through 12 work-shops. An independent professional evaluated change in aggression levels after training using Buss&Perry Aggression Scale. We compared subgroups with shorter versus longer sentences pre and post training using Student's t test. And univariate logistic regression analysis for impacts of sociodemographic variables on aggression scores.