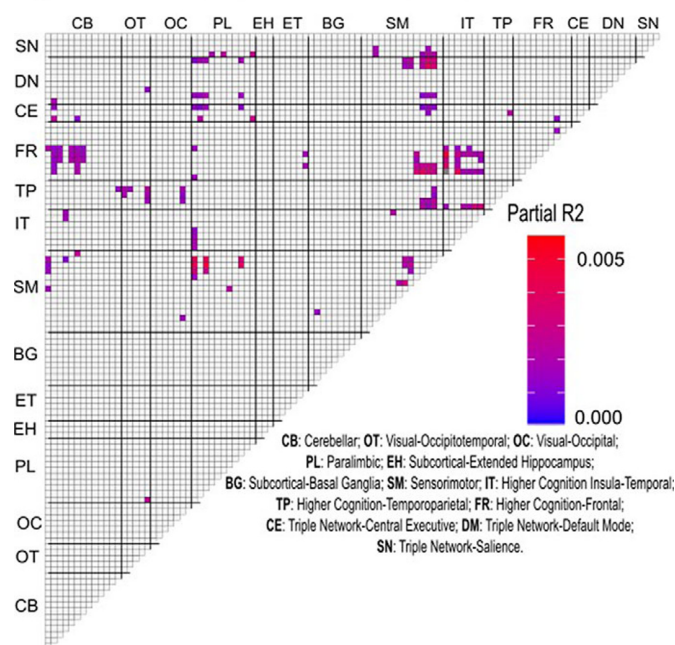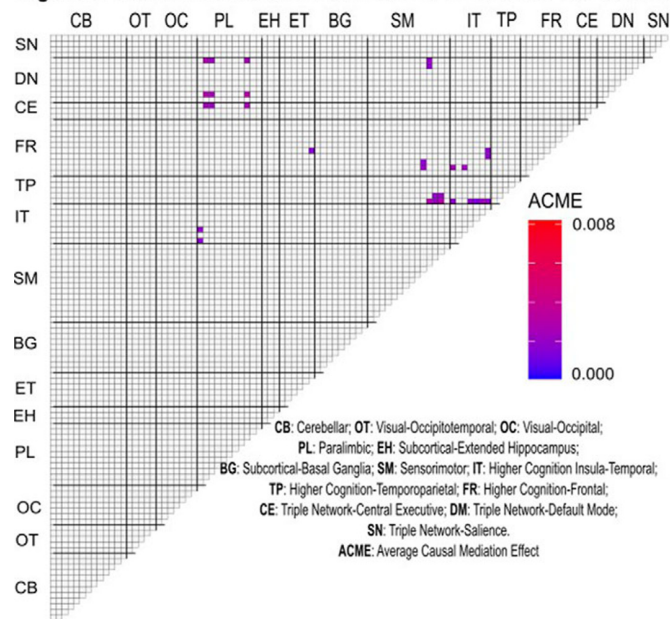**Image 2:**

Figure 2. Associations of DPLE with msFNC in adolescents

Image 3:

Figure 3. Mediation effect of BE between DPLE and msFNC features

Conclusions: Bullying exposure may represent a modifiable risk factor for the development of DPLEs during adolescence. It may influence DPLEs through its effects on relevant functional brain networks. The implementation of targeted interventions to prevent BE during adolescence could serve as a viable strategy to mitigate potential functional brain alterations and reduce the risk of psychosis.

Disclosure of Interest: None Declared

Mental Health Policies

O039

Landscapes of recovery from psychosis: Co-creating real-world solutions in Urban settings

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Introduction: Recovery-oriented care requires a paradigm shift from a vulnerability to a protection model. However, protective factors and resources to recovery in urban milieus remain poorly understood. Whether material, emotional or social, the identification of those resources calls for user-led initiatives and a more situated understanding of environments, where those recovery trajectories occur.

Objectives: The Lausanne-based Urban Remediation program is a multi-stakeholder (service users, psychiatrists, geographers, community actors and public authorities) initiative, which aims to identify key elements of an 'urban recovery milieu for psychosis' and create such a milieu in the city of Lausanne (Switzerland). This talk describes the participatory methods used to create a strategy to foster recovery from psychosis in cities to better inform city's mental health plan and policies.

Methods: We implement a living lab approach aimed at real-world experimentation in four phases: (i) *exploration*, (ii) *co-creation*, (iii) *experimentation*, and (iv) *implementation*. During phase one, we've used participatory mapping, go-along interviews and photovoice for an *in-situ* engagement with 10 young patients to ensure a systematic understanding of obstacles and resources for recovery. For phase 2, qualitative analysis and collective workshops with the various stakeholders were used to co-elaborate relevant urban interventions and identify partners for further implementation.

Results: Introducing a Living Lab methodology to experiment the recovery-oriented strategy in a limited area in a real-world setting provides us with solutions, which can be further scaled up to inform the creation of a more inclusive city. Lessons learnt with early psychosis patients can benefit to the community as a whole, as high sensitivity of psychotic patients can teach us a great deal both regarding urban stressors and resources common to the general population.

Conclusions: Using real-world methodologies in cities allows to mobilize actors and resources beyond individual resilience to support recovery trajectories. Consistent transdisciplinary efforts are needed to involve all stakeholders (urban planners, mental health

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 kow which theraputic approaches, design aspects or intervetnkion features enahnce efficacy.

Objectives: We use a Bayesian meta-regression of an unpdated 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 effiacy 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.

Disclosure of Interest: None Declared

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.

Disclosure of Interest: None Declared