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Abstract: Children and young people spend much time in school and therefore the school setting provides an important setting in which to intervene to promote, protect and enhance mental health. This presentation will provide an overview of the importance of making an economic case for action within schools. A scoping review has been undertaken to map the types of interventions that have been subject to cost-effectiveness evaluation. Aspects of the strengths and weakness of the existing evidence are presented. Implementation and sustainability challenges are also discussed, given the need for collaboration between the health and education sectors.

Disclosure of Interest: None Declared

SP046

Do No Harm: Potential Iatrogenic Harm of School Mental Health Interventions

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Abstract: In this talk I will discuss current findings related to therapeutically informed (e.g., Mindfulness and CBT based) universal school-based interventions for mental health. For example, I will highlight the evidence showing that many of these interventions often lead to null or unstained positive effects, have the potential to elicit negative effects and are not well liked by young people themselves. I will end by suggesting the field moves away from these universal interventions, towards more effective alternatives such as targeted, indirect and 1:1 interventions

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SP047

How can we improve the access of forcibly displaced people to mental health care in Europe?

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Abstract: A growing body of literature report, that vulnerable groups eg refugee, asylum seeker and forcibly displaced groups across Europe face social and psychological challenges linked to their minority status, often involving discrimination and racism. Moreover, they have to overcome many other barriers to accessing healthcare and preventive interventions. There is increasing evidence that a large proportion of refugees or forcibly displaced persons suffer from the consequences of traumatic events and

exhibit psychological problems or develop mental disorders, including post-traumatic stress disorder, depressive and anxiety disorders, and relapses in psychotic episodes. European countries are aware that psychosocial and health services face major challenges and need to develop or expand strategies to overcome them. The direct and indirect consequences of humanitarian catastrophes cannot be estimated at present. In this presentation, strategies to improve the access of forcibly displaced people to mental health care services will be presented and discussed.

Disclosure of Interest: None Declared

SP048

Long-Term Outcomes in First-Episode Psychosis: Insights from a 20-Year Cohort Study to Inform Recovery-Oriented Care Models

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Abstract: Background: Cohort studies in first-episode psychosis (FEP) provide crucial insights into the diverse trajectories of clinical and functional recovery. These studies are invaluable for evaluating the effectiveness of new intervention models and informing resource allocation and policy development.

Objectives: To synthesize quantitative and qualitative findings on mortality and clinical outcomes and to explore their interrelations in a multi-modal investigation of long-term outcomes in FEP. Specific objectives include appraising how this study's findings have influenced the development of new models of care.

Methods: Data were drawn from the iHOPE-20 study, comprising cohort analyses and qualitative interviews with 171 FEP participants diagnosed between 1995–1999 in Dublin, Ireland. Participants with lived experience contributed to the design of the 20-year follow up assessments. Mortality rates were calculated; symptoms, functionality and quality of life trajectories were analyzed using mixed models; and personal recovery themes were derived through thematic analysis. Ongoing analyses are addressing predictors of the number, timing and sequencing of relapses/readmissions among baseline variables as foci for service development.

Results: The study revealed substantial variation in long-term outcomes among individuals with FEP. Shorter DUP was consistently associated with better outcomes across all of the follow-up points. Mortality rates highlighted the importance of interventions to address physical health morbidity. Diagnostic instability over time underscored the dynamic nature of psychosis management. Employment status at follow-up highlighted the importance of strategies to support a return to education or employment after a first presentation.

Conclusions: Findings emphasize the enduring impact of DUP and the need for tailored interventions. Data from this cohort highlight the value of longitudinal insights as a benchmark for comparing the effectiveness of new intervention models. In such studies, addressing ethical and data protection challenges, incorporating the expertise of those with lived experience and harmonising outcome measures remain vital to advance recovery-oriented care models.