

on adolescent hyperactivity and conduct problems was examined considering the three survey time points (pre-, post-, and follow-up) using a series of linear regression models utilizing the Generalized Least Squares (GLS) Maximum Likelihood (ML), unstructured model.

Results: The average score for conduct problems was classified within the normal range, while the average score for hyperactivity was considered borderline at baseline. More than 5 hours of playing video games were significantly associated with increased conduct problems [$\beta = -1.75$, 95% CI = -0.20 – 3.30, $p = 0.03$]. Accounting for age, sex, baseline mental health status, and screen time, the mindfulness intervention program significantly contributed to decreased hyperactivity at post-intervention compared to the baseline [$\beta = -0.49$, 95% CI = -0.91 to -0.08, $p = 0.02$]. It was maintained at follow-up [$\beta = -0.64$, 95% CI = -1.26 to -0.03, $p = 0.04$].

Conclusions: Our findings suggest an adverse impact of excessive video gaming on behavioural problems among community youth and confirm that the trend remains the same. Considering the simplicity, brevity, non-invasive nature and other mental health benefits of the mindfulness intervention, we argue that the results are promising and worthy of further study and larger-scale implementation. Clinicians, parents, and educators should work collaboratively to provide developmentally appropriate strategies to moderate screen time spent on video games among youth.

Disclosure of Interest: None Declared

EPP0443

Interventions targeting social determinants of mental disorders and the Sustainable Development Goals: A systematic review of reviews

T. K. Oswald^{1*}, M. T. Nguyen², L. Mirza^{1,3}, C. Lund^{4,5}, H. G. Jones¹, G. Crowley^{1,6}, D. Aslanyan¹, K. Dean^{2,7}, P. Schofield⁸, M. Hotopf^{1,6} and J. Das-Munshi¹

¹Department of Psychological Medicine, Institute of Psychiatry, Psychology & Neuroscience, King's College London, London, United Kingdom; ²Discipline of Psychiatry and Mental Health, School of Clinical Medicine, Faculty of Medicine and Health, University of New South Wales, Sydney, Australia; ³University Hospitals Sussex, Sussex; ⁴Centre for Global Mental Health, Health Service and Population Research Department, Institute of Psychiatry, Psychology & Neuroscience, King's College London, London, United Kingdom; ⁵Alan J Flisher Centre for Public Mental Health, Department of Psychiatry and Mental Health, University of Cape Town, Cape Town, South Africa; ⁶South London and Maudsley NHS Foundation Trust, London, United Kingdom; ⁷Justice Health and Forensic Mental Health Network, New South Wales, Australia and ⁸School of Life Course and Population Sciences, Faculty of Life Sciences and Medicine, King's College London, London, United Kingdom

*Corresponding author.

doi: 10.1192/j.eurpsy.2024.591

Introduction: Globally, mental disorders account for almost 20% of disease burden and there is growing evidence that mental disorders are associated with various social determinants. Tackling the United Nations Sustainable Development Goals (UN SDGs), which address known social determinants of mental disorders, may be an effective way to reduce the global burden of mental disorders.

Objectives: To examine the evidence base for interventions that seek to improve mental health through targeting the social determinants of mental disorders.

Methods: We conducted a systematic review of reviews, using a five-domain conceptual framework which aligns with the UN SDGs (PROSPERO registration: CRD42022361534). PubMed, PsycInfo, and Scopus were searched from 01 January 2012 until 05 October 2022. Citation follow-up and expert consultation were used to identify additional studies. Systematic reviews including interventions seeking to change or improve a social determinant of mental disorders were eligible for inclusion. Study screening, selection, data extraction, and quality appraisal were conducted in accordance with PRISMA guidelines. The AMSTAR-2 was used to assess included reviews and results were narratively synthesised.

Results: Over 20,000 records were screened, and 101 eligible reviews were included. Most reviews were of low, or critically low, quality. Reviews included interventions which targeted socio-cultural ($n = 31$), economic ($n = 24$), environmental ($n = 19$), demographic ($n = 15$), and neighbourhood ($n = 8$) determinants of mental disorders. Interventions demonstrating the greatest promise for improved mental health from high and moderate quality reviews ($n = 37$) included: digital and brief advocacy interventions for female survivors of intimate partner violence; cash transfers for people in low-middle-income countries; improved work schedules, parenting programs, and job clubs in the work environment; psychosocial support programs for vulnerable individuals following environmental events; and social and emotional learning programs for school students. Few effective neighbourhood-level interventions were identified.

Conclusions: This review presents interventions with the strongest evidence base for the prevention of mental disorders and highlights synergies where addressing the UN SDGs can be beneficial for mental health. A range of issues across the literature were identified, including barriers to conducting randomised controlled trials and lack of follow-up limiting the ability to measure long-term mental health outcomes. Interdisciplinary and novel approaches to intervention design, implementation, and evaluation are required to improve the social circumstances and mental health experienced by individuals, communities, and populations.

Disclosure of Interest: None Declared

Quality Management

EPP0444

The nurses' assessment of the psychiatric care quality and the development of measures to improve it

V. Mitikhin^{1*}, T. Solokhina¹, L. Burygina² and L. Alieva¹

¹Department of Mental Health Services, Mental Health Research Centre and ²Psychiatric clinical hospital № 4 named after P.B. Gannushkin, Moscow, Russian Federation

*Corresponding author.

doi: 10.1192/j.eurpsy.2024.592

Introduction: The development of the methodology for the psychiatric care quality managing is associated with the implementation of criteria and standards, systematic evaluation and the continuous improvement of the care quality. Important role in assessing the care quality belongs to the specialists of the psychiatric

services, who are both “providers” and “internal consumers” of care. At the same time, it is especially significant to take into consideration the opinion of nurses, as the largest group of specialists working in psychiatric institutions and directly providing treatment and care for patients.

Objectives: To assess the quality of care by nurses of psychiatric institutions and to develop evaluation criteria and measures to improve the quality of care.

Methods: Questionnaire «Assessing the satisfaction with quality of care by medical staff of psychiatric institution», including 78 questions about the quality of the structure, process and results of activities (Solokhina et al., 2014); adapted questionnaire «Assessment of the burden of psychiatric staff working in psychiatric institution», including 52 questions (WHO, 1994). The study involved 35 nurses of inpatient and outpatient services of Moscow psychiatric hospital № 4 named after P.B. Gannushkin.

Results: It was found that 76,5% of respondents were satisfied with the quality of provided care in general and 78,2% of them were satisfied professional level of medical staff. The lower satisfaction was obtained when the other aspects were assessed. For example, only 58,6% of respondents were satisfied by relations with colleagues, 55,9% – by support from administration correspondingly. Dissatisfaction of nurses was related with working conditions, salary, excessive control by administration, insufficient professional training and lack of participation in the assessment of the institution's activities.

It was revealed that the integral index of professional burden of nurses was at the average level ($1,47 \pm 0,26$). Inverse correlations between burden of staff and satisfaction with quality of care and institution's activities were established. This allows to consider the professional burden as criterion in assessing the quality of care. Using obtained results, a training aimed at improving the communicative competence of medical personnel was developed and implemented in practice (Trushkina, Solokhina, 2019). For today more the 60 nurses have taken part in this training. The results demonstrate the professional growth of the participants and their communication patterns expansion.

Conclusions: Nurses' satisfaction and indicators of professional burden both can be used as criteria of assessment of the psychiatric care quality. It is also necessary to introduce in psychiatric institutions training aimed at continuous professional skills improving.

Disclosure of Interest: None Declared

Prevention of Mental Disorders

EPP0445

Introducing the construct of risky cannabis use: designing and piloting a co-created educational intervention on cannabis health literacy among adolescents and young adults. The CAHLY (CAnabis Health Literacy) study.

E. Caballeria^{1,2*}, C. Oliveras^{1,2}, P. Guzmán^{1,2}, M. Ballbé^{1,3}, B. Fleur^{1,2}, B. Pol^{1,2}, D. Ilzarbe^{4,5,6}, H. López-Pelayo^{1,2}, S. Matrai^{1,2}, M. Artigas², M. T. Pons-Cabrera^{1,2}, D. Folch^{1,2}, L. Nuño^{1,2} and M. Balcells-Oliveró^{1,2}

¹Health and Addictions Research Group (Grup de Recerca Emergent, 2021 SGR 01158, AGAUR), IDIBAPS; ²Addictions Unit. Psychiatry

and Psychology Service, Hospital Clinic de Barcelona; ³Tobacco control Unit, Institut Català d'Oncologia - IDIBELL; ⁴IDIBAPS; ⁵Department of Child and Adolescent Psychiatry and Psychology, SGR-881, Hospital Clinic de Barcelona and ⁶CIBERSAM, Barcelona, Spain

*Corresponding author.

doi: 10.1192/j.eurpsy.2024.593

Introduction: Cannabis use poses a significant risk to the psychological wellbeing of youth, affecting academic performance and potentially triggering the onset of mental health issues. Providing young people with comprehensive information about patterns of cannabis use and specific factors that increase an individual's health risks is crucial. The ability to critically assimilate this information is known as health literacy (HL).

Objectives: To design a psychoeducational intervention to increase HL on risky cannabis use among students aged 16-25, and to assess its usability and feasibility.

Methods: We designed a psychoeducational intervention based on the outcomes of a 3-hour co-creation session involving healthcare professionals and students. 29 university students and 25 high-school students completed this intervention and assessed its usability and feasibility with the SUS (System Usability Scale), PSSUQ (Post-Study System Usability Questionnaire) and additional open questions regarding the most and less-liked aspects of the intervention.

Results: The design phase resulted in an informative website (<http://www.cahlyclinic.cat/>) and a 1-hour structured onsite educator-facilitated session, comprising 3 group activities (completed on paper or online) addressing three dimensions of cannabis HL: searching for, interpreting and applying reliable information. Usability of the intervention was rated as excellent (SUS mean score >80). PSSUQ results indicate that students were satisfied with the intervention; found the HL information clear, relevant, and adequate for their needs; found the interface of the digital version pleasant and usable without support; and would recommend it to other students.

Conclusions: We propose an innovative structured and usable intervention, designed using a participatory approach, which aims to disseminate information on risky cannabis use to a key target population, namely young people.

Disclosure of Interest: None Declared

EPP0446

From ADHD to well-being: The Role of Rejection Sensitivity in college life

V. Müller^{1*} and B. Pikó²

¹Doctoral School of Education and ²Department of Behavioral Sciences, University of Szeged, Szeged, Hungary

*Corresponding author.

doi: 10.1192/j.eurpsy.2024.594

Introduction: Rejection-sensitivity is a prevalent yet understudied emotional symptom often associated with adult ADHD. While ADHD research typically focuses on behavioral and cognitive facets, emerging evidence highlights the significance of emotional symptoms. Emotional dysregulation in ADHD impacts psychological well-being and mental health. Our study examines how ADHD symptoms relate to rejection sensitivity, considering factors like resiliency, self-regulation, and overall well-being.