

Results: All five videos successfully reached a broad audience, with a combined total of 808,000 impressions, 287,000 viewers, and 4,148 link clicks. The Human-Narrated Personal Story (Intervention) video was highly effective, achieving 874 link clicks and a competitive CPC of \$0.92, outperforming three of the four control videos. The AI-Narrated Educational Text (Control 3) had the highest number of link clicks (985) and lowest CPC (\$0.82), while the AI-Narrated Personal Story (Control 1) had the fewest link clicks (680) and highest CPC (\$1.18).

Conclusions: The intervention video successfully engaged the target audience, supporting its feasibility and acceptability for broader dissemination. Instagram proves to be a viable platform for disseminating evidence-based mental health interventions aimed at reducing depression stigma among youth. The study supports the potential for using social media in public mental health strategies, though further research is needed to evaluate its impact on help-seeking behaviors and across diverse demographic groups.

Disclosure of Interest: None Declared

Prevention of Mental Disorders

O038

Multi-Scale Functional Network Connectivity Mediates The Association Between Bullying Exposure and Distressing Psychotic-Like Experiences in Healthy Adolescents

P. Andrés Camazón^{1*}, R. Ballem², J. Chen², V. Calhoun², J. Galvañ¹, L. Lopez³, J. C. Pedrosa³, B. Sáez³, M. Alonso³, J. Suárez³, N. Cruz³, M. Gonzalo³, M. R. Lopez³, B. Arribas³, A. Irají² and C. M Díaz-Caneja¹

¹Institute of Psychiatry and Mental Health, Hospital General Universitario Gregorio Marañón, IiSGM, CIBERSAM, ISCIII, School of Medicine, Universidad Complutense, Madrid, Spain, Madrid, Spain;

²Translational Research in Neuroimaging and Data Science (Georgia State University, Georgia Institute of Technology, Emory University), Atlanta, Georgia, United States., Atlanta, United States and ³Institute of Psychiatry and Mental Health, Hospital General Universitario Gregorio Marañón, Madrid, Spain

*Corresponding author.

doi: 10.1192/j.eurpsy.2025.302

Introduction: Bullying, deliberate aggression by a peer or group of peers in a power imbalance that favors the aggressor, is a frequent and preventable traumatic event during adolescence (Abregú-Crespo R et al. The Lancet Child & Adolescent Health 2024; 8:122–134). Mitigating its impact could be a viable strategy for psychosis prevention (Fraguas, D. et al. JAMA Pediatrics 2021; 175, 44–55). A better understanding of its influence on brain development during adolescence could be crucial for implementing effective interventions.

Objectives: To study the relationship between bullying exposure (BE), distressing psychotic-like experiences (DPLEs), and multi-

scale functional network connectivity (msFNC) in the developing brains of 12-year-old adolescents.

Methods: We used cross-sectional data from 12-year-old adolescents from the Adolescent Brain Cognitive Development Study, which recruited a representative sample of healthy adolescents from across the United States. We fitted a linear mixed model to predict DPLEs (Prodromal Questionnaire-Brief Child Version) with BE (Peer Experience Questionnaire) as a predictor ($n=10,388$). We analyzed functional magnetic resonance imaging data with reference-informed independent component analysis and a canonical and replicable multi-scale intrinsic connectivity network template to extract whole-brain 5460 msFNC features (Iraji, A. et al. Hum Brain Mapp 2023 44, 5729–5748). We fitted 5460 linear mixed models to predict DPLEs with BE as a predictor and analyzed the mediation effect of each of the 5460 FNC features ($n=5,409$). All models were fitted with family and site as random effects, adjusted for covariates (age, sex, race, ethnicity, pubertal development, and family income), and corrected for multiple comparisons.

Results: BE was significantly associated with DPLEs ($\beta=0.39$, CI [0.37, 0.41], $t(10362) = 41.00$, $p<.001$, $R^2=0.36$, $p<.000$) (Fig.1). DPLEs were associated with msFNC predominantly between cerebellar, paralimbic, somatomotor, insulotemporal, frontal, temporoparietal, and central executive networks (Fig.2). The association between DPLEs and BE was primarily mediated by msFNC between the paralimbic, somatomotor, insulotemporal, frontal, and temporoparietal networks (Fig.3).

Image 1:

Fig.1. Bullying is associated with higher DPLE

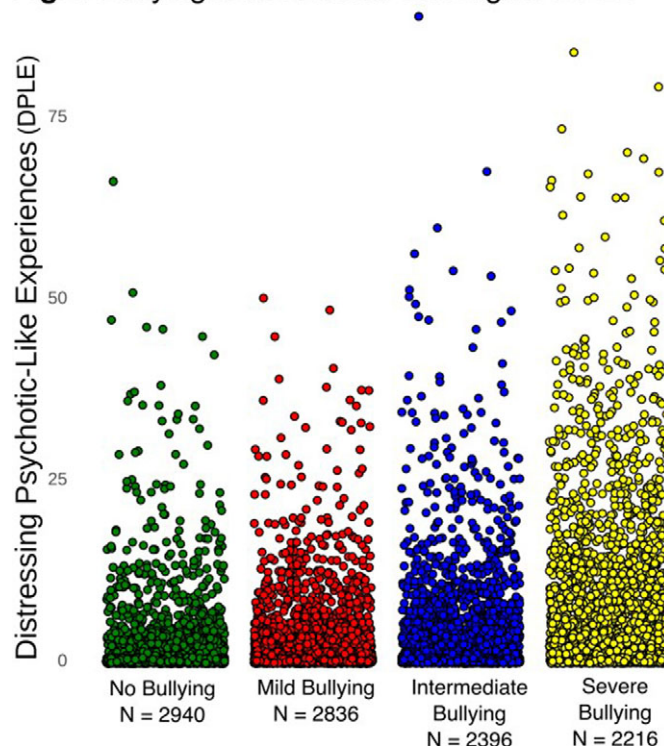


Image 2:

Figure 2. Associations of DPLE with msFNC in adolescents

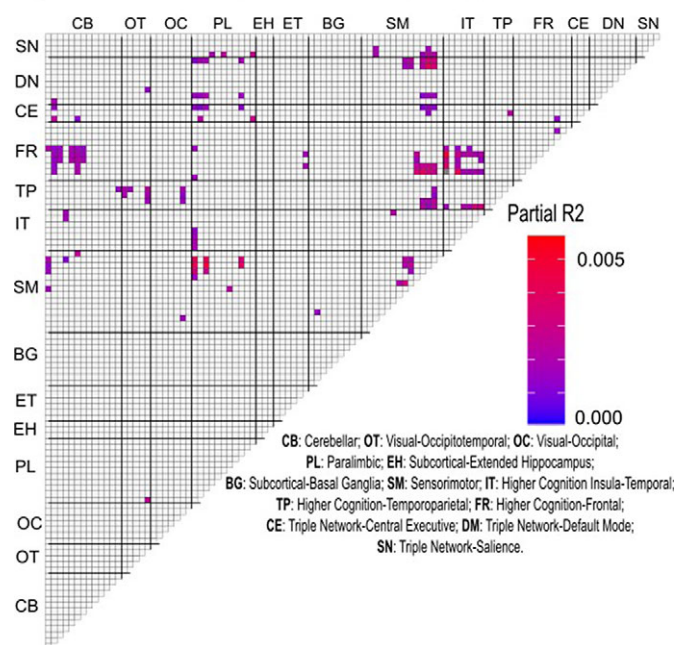
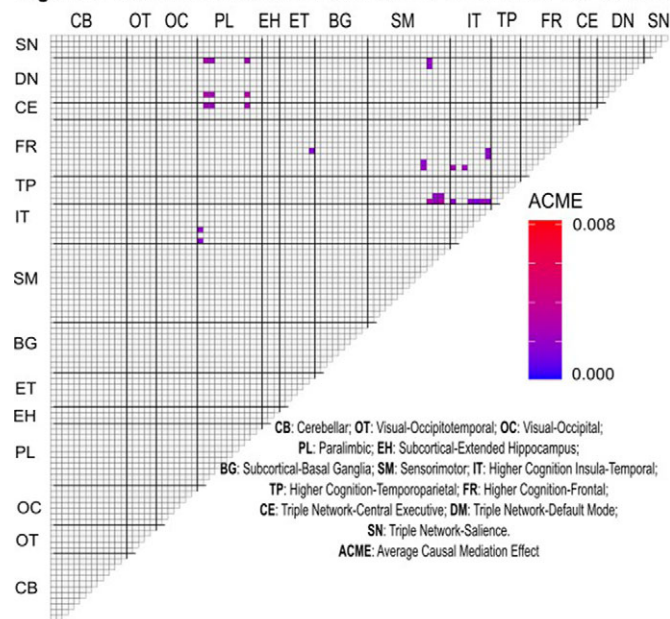


Image 3:

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

L. A. A. Empson^{1,2*}, O. Söderström³, M. Winz³, J. Favrod⁴, P. Golay⁵, A. Ruggeri³ and P. Conus¹

¹Service of General Psychiatry, Department of Psychiatry, CHUV, Treatment and early Intervention in Psychosis Program (TIPP);

²Faculty of Biology and Medicine, University of Lausanne, Lausanne;

³Geography Institute, Neuchâtel University, Neuchâtel; ⁴SO-PSY, Goumoens-la-Ville and ⁵School of Nursing Sciences, La Source University of Applied Sciences and Arts, Lausanne, Switzerland

*Corresponding author.

doi: 10.1192/j.eurpsy.2025.303

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 photo-voice 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