

EPP374

Self-harm, early emotional neglect and alexithymia in young Italian help seekers

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Introduction: Recent studies showed that non-suicidal Self-Injury (NSSI) is a transdiagnostic behavior with multiple functions and motivational factors. More specifically, two key functions have been identified: the first is an interpersonal function (hurting/punishing others, influencing others' behavior); the second involves personal goals (emotions regulation, dissociation, self-punishment). Some distal factors may contribute to the onset of this behavior (e.g., childhood abuse, emotional neglect), resulting in emotional dysregulation and alexithymia. Alexithymia, also called emotional blindness, a coping strategy to reduce emotional pain following trauma traumatic life events, emerged as a predictor of NSSI.

Objectives: The study aimed to investigate in a sample of young Italian help seekers referred to an early intervention service and a university counseling and consultation service (1) the prevalence of NSSI behaviors; (2) their correlation to early traumatic life experiences and alexithymia symptoms.

Methods: From March 2023, the young adults participating in this study filled a standardized battery (through a QR code). In this preliminary analysis, only data concerning the Deliberate Self-Harm Inventory (DSHI), Childhood Trauma Questionnaire – Short Form (CTQ-SF), and the Toronto Alexithymia Scale (TAS – 20) were considered.

Results: Nowadays, 73 young adults participated in the study (60% women; mean age 26 years, SD 4.2). A third of the sample reported NSSI behavior lifetime, with a higher distribution among women ($\chi^2 = 9.425$ $p = 0.002$). By comparing the NSSI and No-NSSI groups, only the emotional neglect dimension exceed the clinical cut-off even if statistically significant differences emerged in all the early traumatic dimensions, with higher scores in the NSSI group as regard the emotional abuse ($F = 18.321$; $p = 0.000$), physical abuse ($F = 17.556$; $p = 0.000$), sexual abuse ($F = 5.200$; $p = 0.026$), emotional neglect ($F = 20.053$; $p = 0.000$), physical neglect ($F = 12.134$; $p = 0.001$), minimization/denial ($F = 13.384$; $p = 0.000$). The alexithymia symptoms, assessed with the TAS-20 scale, the NSSI group showed higher scores with a statistically significant difference compared to the No-NSSI group ($F = 15.842$; $p = 0.000$) and, specifically, in the “difficulty describing feelings” ($F = 10.351$; $p = 0.002$) and “difficulty in identifying emotions” ($F = 13.543$; $p = 0.000$).

Conclusions: According to the social neuroscience model, these preliminary results suggested that young adults that practice self-harm behaviors may have experienced early emotional neglect, determining a vulnerability to recognize and regulate emotions in response to stressful events. It is therefore crucial to assess and monitor this behavior in all young people help seekers from mental health services, concerning the history of traumatic events and emotional difficulties, to plan personalized evidence-based interventions.

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EPP375

Association between substance use and sleep disturbances among adolescents: Systematic review and meta-analysis

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Introduction: Substance use is a major factor contributing to sleep disturbances in adolescents, whose developing brains are especially vulnerable. The previous studies have primarily focused on adults or individual substances.

Objectives: This meta-analysis examined the overall association between substance use and sleep disturbances in adolescents.

Methods: Relevant studies were systematically searched across multiple databases, including CINHAL (via EBSCOHOST), PubMed, Scopus, Ovid Medline, Embase, PsychINFO (via EBSCOHOST), and Web of Science, from inception until October 2021. A random-effects model was employed to calculate pooled Odds Ratios (OR) with 95% confidence intervals (CIs). Forest plots and Cochran's Q statistic p values were utilized to assess heterogeneity among the studies. Subgroup and meta-regression analyses were conducted to compare groups and identify sources of heterogeneity. Study quality was evaluated using the Joanna Briggs Institute tool, and sensitivity analysis was performed to test the robustness of the results.

Results: A comprehensive search identified 16,870 studies, of which 18 were included in the review and meta-analysis (Figure 1), published between 1993 and 2021. The studies were of high quality and had a low risk of bias. The results showed that substance use significantly contributes to sleep disturbances in adolescents (OR = 1.70, 95% CI: 1.49–1.94) (Figure2). Alcohol users, coffee drinkers, and smokers were significantly more likely to experience sleep disturbances (OR = 1.77, OR = 1.58; OR = 1.66), while marijuana showed a non-significant association (OR = 1.29) (Table 1). Additionally, alcohol and smoking were significantly associated with insomnia (OR = 1.82, 95% CI: 1.43–2.33 and OR = 1.75, 95% CI: 1.31–2.33), hypersomnolence (alcohol: OR = 1.46, 95% CI: 1.18–1.81), and sleep-related breathing disorders (S-RBD) (alcohol: OR = 2.29, 95% CI: 1.53–3.42; smoking: OR = 2.30, 95% CI: 1.23–4.30), with coffee also significantly associated with insomnia (OR = 1.58, 95% CI: 1.30–1.93). There was considerable heterogeneity among the studies, however, subgroup and meta-regression analysis indicated no statistically significant sources of heterogeneity.

Table 1 Association between individual substance use and sleep disturbances

	n Study	OR	95% CI Lower limit	Upper limit	Q -value	Heterogeneity P-Value	I ²
Alcohol	15	1.77	1.55	2.03	102.21	<0.001	86.30
Coffee	3	1.58	1.30	1.93	6.02	<0.005	66.81
Marijuana	3	1.29	0.78	2.13	24.38	<0.001	91.79
Smoking	15	1.66	1.37	2.01	278.13	<0.001	94.96