

Introduction: Child sexual offending is a significant societal concern with profound consequences. While some individuals with a history of childhood sexual abuse (CSA) may reenact their traumatic experiences later in life, the link between CSA and subsequent offending patterns among individuals convicted of child sexual offending (ICSOs) remains complex and under-researched.

Objectives: This study aimed to investigate the prevalence of self-reported physical and sexual violence among ICSOs and explore the link between self-experienced CSA and offending behavior, particularly focusing on the age and relationship with their victims. We hypothesized that ICSOs would replicate their own victimization experiences when perpetrating CSA.

Methods: A cohort of 78 male ICSOs referred to the Danish Sexual Offender Treatment and Research Program (DASOP) between October 1, 1997, and October 1, 2001, for court-ordered pre/post-trial evaluations was analyzed. Data on self-reported experiences of CSA, physical violence, and characteristics of their victims were collected and examined for patterns.

Results: Of the 31% of ICSOs who reported CSA exposure, 82% of those abused before age 11 targeted victims under 11, while 71% of those abused at 11 or older offended against victims in the same age group, indicating a significant association ($p=0.004$) between offenders' age at the time of abuse and the age of their victims. Additionally, 86% of those who reported CSA by family members, predominantly targeted children within their households, suggesting a link between family-based CSA and intra-familial offending (86% vs. 48%, p -value = 0.059). Furthermore, among the 55% exposed to physical violence, more used physical force on their victims than those who did not report such adverse experiences (75% vs. 25%, p -value 0.401).

Conclusions: The findings indicate a potential link between offenders' own CSA experiences and their subsequent victim selection, supporting the hypothesis that reenactment of trauma may play a role in offending behavior (Garbutt et al., 2023). These results emphasize the importance of understanding the influence of early trauma to inform prevention and intervention strategies aimed at reducing CSA perpetrated by both children and adults with prior victimization histories. However, most victims of such trauma do not reenact their trauma.

Disclosure of Interest: None Declared

EPP574

Analysis of the therapeutic effect of the long-acting injectable form of aripiprazole in incarcerated adult males in Greece

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Introduction: The World Health Organization (WHO) estimates that in Western societies the incidence of psychiatric disorders is up to seven times higher in the prison population. Drug dependence is also a major destabilizing factor in this population. Our study is the first one in Greece with a focus group of incarcerated males which have comorbidity of emotional psychosis and Substance Use Disorder.

Objectives: Hypothesis testing: "Aripiprazole LAI antipsychotic treatment is associated with improved quality of life and functionality in incarcerated patients with comorbidity of Bipolar disease - I (BD-I) and Substance Use Disorder (SUD)".

Methods: 30 patients with BD I were prisoners at the Penitentiary of Neapolis of Lasithi of Crete (Greece). Median age was 36 years (all men). 76.67 % had comorbidity of bipolar disorder type I (BD-I) and alcohol use disorders. 80% had comorbidity of BD-I and cocaine use disorders. 93.3% had comorbidity of BD - I and Cannabis Use Disorder. All were medicated in prison by aripiprazole LAI 400mg/month. For the evaluation of our hypotheses the instruments WHOQOL-BREF questionnaire and the CGI-S scale were used. The quality of life and the functionality were compared in each patient, before the initiation of the LAI medication and during the active treatment period. The minimum of follow-up period was 6 months. Five cases of patients, who remained compliant with LAIs treatment after release from prison for a period of at least 6 months maintained a very good quality of life without ever getting into trouble with the law again.

Results: In all 30 patients (imprisoned) of our sample, the CGI-S score with depot aripiprazole therapy administrated at least for 6 months decreased statistically significantly from 5.72 ± 0.88 to 2.94 ± 1.33 (Paired Samples Wilcoxon Signed Rank Test p -value < 0.001). Additional, the quality-of-life scale score of these patients increased statistically significantly from 0.7 ± 0.53 to 3.6 ± 0.67 (Paired Samples Wilcoxon Signed Rank Test p -value < 0.001) with depot aripiprazole therapy administrated at least for 6 months too.

Conclusions: Aripiprazole LAI significantly improves the quality of life and functionality of patients with dual diagnosis of emotional psychosis and SUD in prison. Our study highlights that ensuring medication compliance, during the incarceration and after the release from prison, delays the time to reincarceration for this specific population or diminishes importantly the probability of the reincarceration.

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Migration and Mental Health of Immigrants

EPP576

Ways to Support Mental Health and Mental Well-being of Racialized and Immigrant Communities: A Concept Mapping Study

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