

EPP300

Examining predictors of non-suicidal self-injury among college students: A prospective cohort study

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Introduction: Non-suicidal self-injury (NSSI) refers to the deliberate act physical harm without intent of suicide. Common forms of NSSI include cutting, burning, and hitting oneself. The prevalence of NSSI among college students have been estimated to be between 15% to 25% and higher than in the general population. Investigating patterns associated neurobiological and personality traits may provide a more comprehensive understanding of NSSI.

Objectives: We aim to identify latent trajectory classes for NSSI behavior among college students. We expect that baseline personality and the behavioral inhibition/activation scales (BIS/BAS) will predict NSSI trajectory.

Methods: A total of 704 first-year university students at University of Victoria, Canada, were recruited in the beginning of the first semester over two consecutive academic years. Participants attended a baseline testing session completing self-report measures including the Ten Item Personality Inventory, BIS/BAS and NSSI instruments. There were monthly follow-up sessions from October to April. Longitudinal data will be analysed with latent growth curve modeling and group-based trajectory modeling, and baseline predictors will be analysed with multivariate logistic regression.

Results: Latent class growth analysis found three distinct classes of NSSI during the follow-up period. A small percentage (2.4%) of the participants had a high degree of self-injury throughout the follow-up period. A second class of 13.4% of the participants had a moderate degree of self-injury at baseline, which fell throughout the follow-up period. Lastly, a third class of the majority of the participants (84.3%) had minor or none self-injury both at baseline and in the follow-up period. Concerning baseline predictors, higher openness and BAS drive were associated with lower NSSI at baseline.

Conclusions: In line with previous studies, we identified three distinct trajectories of NSSI behavior among college students. Notably, low openness and low BAS drive were associated with a degree of NSSI at baseline. These findings suggest that openness and drive may play a protective role in NSSI, providing valuable insights for future prevention and intervention efforts. The project is part of the Collaborative Research Program at the International Society for the Study of Self-Injury.

Disclosure of Interest: None Declared

EPP299

Exploring the subjective role of diet for people living with severe mental illness: insights from a biopsychosocial perspective

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Introduction: People living with severe mental illness (SMI) face a life expectancy reduction of 10 to 20 years, often due to physical comorbidities. In addition to medication side effects, unhealthy lifestyle choices may contribute to this disparity.

Objectives: Understanding the experiences and views of people living with SMI regarding diet is essential in addressing these challenges.

Methods: To explore the role of nutrition and its determinants within a biopsychosocial framework, 28 semi-structured interviews were conducted with service users living in Germany, Austria, and Australia. A generic thematic analysis was applied to uncover key themes around implications of dietary behavior and its determinants.

Results: Both positive and negative effects of diet were reported. A prominent theme was the mental strain related to body weight, which contributed to feelings of guilt and experiences of stigma. Numerous biological, psychological, and social factors were identified as influencing dietary choices and behaviors. Many participants expressed a desire for greater support in achieving dietary balance and breaking the vicious cycle between diet and mental health.

Conclusions: From the viewpoint of people living with SMI, dietary interventions should be more integrated into mental health care. Psychosocial aspects, such as the emotional impact of eating, are as important as biological factors like nutrient intake, emphasizing the need for a holistic approach to addressing diet in mental health care.

Disclosure of Interest: None Declared

EPP300

Prevalence and Risk Profile of Depression Among Adolescents in Rural and Indigenous Communities of Mexico: A Cross-Sectional Study

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Introduction: Depressive disorders are the most prevalent chronic mental disorders globally, affecting approximately 322 million people, or 4.4% of the world's population, with a significant portion residing in the Americas, including Mexico. Adolescence represents a critical period for the onset of depression, where preventive interventions should focus on enhancing cognitive abilities, which are malleable and can mitigate the impact of early negative experiences, particularly in marginalized areas and indigenous communities.

Objectives: To identify the prevalence of depressive symptoms and characteristics associated with the presence or absence of depressive

symptoms in a population of adolescents and young adults residing in rural and indigenous communities in San Luis Potosi state, Mexico.

Methods: A cross-sectional study was conducted. Depressive symptoms were assessed using the Patient Health Questionnaire-9 (PHQ-9), while anxiety symptoms were measured using the Generalized Anxiety Disorder-7 (GAD-7) scale. Descriptive statistics, a comparative analysis and a principal components analysis were performed with the sociodemographic data and the evaluations of each item of the PHQ9 and GAD7.

Results: 1,057 participants aged between 15 and 25 years (16.63 ± 1.53 years) were included in the study. The sample comprised 60.51% females 39.48% males, and 7 participants reported speaking an indigenous language. 28.67% of participants had responses compatible with anxiety, while 34.98% had depression, of which 46.1% qualified as having major depressive disorder. Regarding GAD7, participants with higher severity scores presented a higher average response on item 3 about feeling excessively worried about different things, while those with depression did not respond predominantly to questions regarding mood, but rather to item 3 referring to having difficulty falling or staying asleep and item 4 about feeling tired or having low energy. 4.67% of participants reported suicidal ideation almost every day. When the GAD7 and PHQ9 items were subjected to a principal component analysis, it was observed that PC1=51.67%. The factors self-reported as most closely linked to depressive and anxious symptoms included the age of the caregiver, sex and age of the participant, as well as whether they spoke an indigenous language.

Conclusions: Difficulty falling and staying asleep, as well as perceived lack of energy or fatigue, are the main ways in which this population recognizes signs of depression, rather than feelings of sadness or anhedonia. Given the high prevalence of depressive symptoms and the identified risk profiles, there is an urgent need for targeted mental health services and interventions in these vulnerable populations.

Disclosure of Interest: None Declared

Forensic Psychiatry

EPP302

Incidents of violence and proportionality of restrictive practices: a D-FOREST study

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Introduction: Aggression and violence are common in psychiatric in-patient wards. Preventive measures such as de-escalation, increased observations, extra medication, restraint and seclusion are utilised by nurses and authorised by doctors in a highly skilled way that should be proportionate to the risks posed. There is limited empirical data on the proportionality of the use of restrictive practices within Irish forensic psychiatric units.

Objectives: The aim of this study was to rate the severity of incidents and proportionality of response to incidents in the high secure unit within the National Forensic Mental Health Service.

Methods: This is a prospective cohort study set in the Central Mental Hospital. Patients were assessed each day using the Dynamic Assessment of Situational Aggression (DASA) scale and incidents were rated each day using the DUNDRUM Restriction-Intrusion of Liberty Ladders Scales (DRILL), which includes the assessment of adverse incidents, violence and self-harm, interventions including restrictive practices and consequences. In this study we used episodes of restriction as an outcome measure. Data were gathered as part of the Dundrum Forensic Redevelopment Evaluation Study (D-FOREST). Generalised Estimating Equations were used to analyse repeated measures in the same subjects.

Results: There were 384 patient days in scope, 411 lines of data including 326 patient-days, 85 incidents and 63 incidents of seclusion. The DRILL scales had good internal consistency (DRILL behaviours scale Cronbach's alpha=0.789; DRILL interventions scale Alpha=0.866). The DASA on the day before an incident predicted the score on the DRILL behaviours scale (severity of behaviours) Wald $X^2=39565.2$, $p<0.001$, with DUNDRUM-1 triage security scale also contributing significantly to the model Wald $X^2=884.3$, $p<0.001$. The best model to predict the DRILL interventions scale included DASA on the day before (Wald $X^2=14.6$, $p=0.012$) DRILL-behaviours scale (Wald $X^2=728.7$, $p<0.001$) and DUNDRUM-1 (Wald $X^2=10,819.4$, $p<0.001$). This was also the best model to predict whether or not a patient was secluded (DASA day before Wald $X^2=46.4$, $p<0.001$; DRILL-behaviours scale Wald $X^2=173.2$, $p<0.001$; DUNDRUM-1 Wald $X^2=6153.5$, $p<0.001$).

Conclusions: Harmful behaviours and preventive and restrictive interventions can be described by rating items ('ladders') with good internal consistency, demonstrating that behaviour escalates in a meaningful sequence of increasingly serious harmful occurrences. The more serious the incident, the higher the level of restrictive practice used, demonstrating proportionality. This model of short term risk assessment and preventative interventions can be used to develop more effective and less restrictive interventions. Future research will explore moderating and mediating factors.

Disclosure of Interest: None Declared

EPP303

The application value of facial expression analysis system in violence risk assessment of patients with mental disorders

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