

8TH EUROPEAN SOCIETY FOR RESEARCH ON INTERNET INTERVENTIONS CONFERENCE

VILNIUS, LITHUANIA | 2025



esri european society
for research on
internet interventions

ABSTRACT BOOK

OCTOBER 3 - 5
2025

POSTER PRESENTATIONS // // // // //



esrii2025.org

EUROPEAN SOCIETY FOR RESEARCH ON INTERNET INTERVENTIONS 8TH CONFERENCE

Oct 3 – Oct 5, 2025 | Vilnius, Lithuania

Scientific Advisory Board: Prof. Dr. Evaldas Kazlauskas (Vilnius University, LT), Prof. Dr. Gerhard Andersson (Linköping University, SE), Prof. Dr. Pim Cuijpers (Vrije Universiteit Amsterdam, NL), Prof. Dr. Heleen Riper (Vrije Universiteit Amsterdam, NL), Prof. Dr. Per Carlbring (Stockholm University, SE), Prof. Dr. Kate Cavanagh (University of Sussex, UK), Prof. Dr. Annemieke van Straten (Vrije Universiteit Amsterdam, NL), Prof. Dr. Thomas Berger (Universität Bern, CH), Dr. Tom Van Daele (Thomas More University of Applied Sciences, BE), Dr. Robin Kok (Vrije Universiteit Amsterdam, NL), Prof. Dr. Soledad Quero (Universidad Jaume I, ES), Prof. Dr. Roman Cieslak (SWPS University, PL), Prof. Dr. Kristina Žardeckaitė-Matulaitienė (Vytautas Magnus University, LT), Assoc. Prof. Dr. Kim Mathiasen (University of Southern Denmark, DK), Prof. Dr. Nick Titov (Macquarie University, AU), Assoc. Prof. Dr. Jonas Eimontas (Vilnius University, LT).

Vilnius University ESRII2025 Conference Organizing Team: Jonas Eimontas (Chair), Augustė Nomeikaitė, Monika Kvedaraitė, Inga Truskauskaitė, Raimonda Sadauskaitė, Elena Lapinskaitė-Vvohlfahrt.

PLATINUM SPONSORS



Faculty of
Philosophy

GOLD SPONSORS



SILVER SPONSORS



ABSTRACTS AND PROGRAM | POSTER SESSIONS

European Society for Research on Internet Interventions 8th Conference

Oct 3 – Oct 5, 2025 | Vilnius, Lithuania

SATURDAY OCT. 4TH | FIRST SESSION 10:30-11:00.....6

What do the therapists think of blended intervention for Adjustment Disorder? Preliminary results of a qualitative study	6
Enhancing Work Self-efficacy and Occupational Well-being in Young Employees by Targeting Meta Self-efficacy: a Protocol for a Randomized Controlled Trial of an Internet Intervention	7
Rule-based chatbot application for adolescents with anxiety: a non-randomized pilot and feasibility study.....	7
Beyond the Ivory Tower: Community-Based Participatory Research for Developing a Digital Psychological Intervention to increase Resilience and Connect Vulnerable Citizens in Europe (RECONNECTED).....	8
Digital moms in South European Countries: Acceptability and perceived barriers and facilitators of digital solutions uptake for perinatal mood/anxiety disorders in Italian, Portuguese and Spanish perinatal women.....	9
Mobile vs. large screen in web-based internet interventions - does it make a difference?	10
Vladimir Ivanov. Uncertain Allies? Probing the Relationship Between Gaming Experience, Gender, Visuospatial Ability, and VR Memory	10
Emotional effects of a brief child-robot interaction to teach school-aged children a relaxation exercise	11
Overview and content of a Chatbot-Based CBT Intervention for Youth adapted for use in Lithuania.....	12
Mental health in the digital age: the needs and expectations of young adults	13

SATURDAY OCT. 4TH | SECOND SESSION 14:30-15:00 14

Increasing adherence to an internet-based intervention for the treatment of Prolonged Grief Disorder.....	14
Post-pandemic depression, anxiety, and well-being among an adult sample seeking emotional support through the web-based intervention “Well-being Online”	15

A complex system approach towards Resilient and CONNECTED vulnerable European communities in times of change: study protocol for a full factorial trial in nine European countries	16
User Design of UNISALUD, a platform for university students reduce consumption of ultra processed food and increase physical activity	17
How do parents look for adolescent mental health information online and what do they think of what they find? A qualitative study to inform the design of an online intervention for parents	17
Culturally adapted universal digital parenting intervention for immigrant families in Finland	18
The role of psychological flexibility and psychological factors in chronic pelvic pain among women: a correlational study	19
What do therapists think about AI and data-driven methods in mental healthcare? A mixed-methods investigation	20
Brazilian linguistic and cultural adaptation of the web-based psychological intervention Online Well-being (Bem-estar Online): Phase 1.	20
Development and status of the Swedish National Quality Register for internet-delivered psychological treatment, SibeR.....	22
SATURDAY OCT. 4TH THIRD SESSION 16:00-16:30.....	23
Cultivating Compassion with Virtual Reality: Preliminary Data from a RCT.....	23
Optimizing a digital mental health intervention for youth with ADHD: youth perspectives on digital health promotion	23
Evaluation of an informational website on learning disorders: a mixed-methods study .	24
Memory training with the Method of Loci in VR.....	25
Scaling mental health training with AVATALK: A virtual human approach	26
Effectiveness of digital mental health interventions for children and adolescents with anxiety and depressive symptoms: A systematic review and meta-analysis using ChatGPT4o	27
Towards enhancing a psychoeducational Manual (PC) through a blended-approach: Ongoing development of a low-threshold, multilingual and mobile Intervention.....	27
Improving Neonatal Care Quality and Parental Involvement with the NeoParent App ...	28
SATURDAY OCT. 5TH FIRST SESSION 10:30-11:00.....	29

Unlocking Engagement: Recruitment Strategies and Participant Motivation in Online Mental Health Interventions – Insights from PrevANS	29
A Protocol for Implementing Patient and Public Involvement(PPI) in a Randomized Controlled Trial of a Digital Intervention for Preventing Depression and Anxiety in Spain and Chile (Pandora App)	30
Concurrent validity between self-reported walking frequency and duration and wrist accelerometry data in older adults with obesity	31
A personalized intervention to prevent depression at the workplace based on risk predictive algorithms and decision support systems: protocol of thee-predict D-WORK study	32
An online transdiagnostic and personalised intervention for prevention of anxiety and depression over risk assessment in Spain and Chile: protocol of the PANDORA randomized controlled trial	33
BePresent universal online parenting intervention: Assessing parents intervention satisfaction	34
Co-Creation in Digital Health: Developing a Mobile App for Monitoring Depression During Pregnancy.....	35
Smartphone Application Development Framework for Psychological Skills Training.....	36
Procrastination or Progress? A Randomized Controlled Pilot Study Comparing the Acceptance and Adherence of the Internet-Based Intervention "StudiCareProcrastination" as a Blended versus Stand-Alone Version for College Students	37
Study protocol: My Symptoms Young – a new internet-based programme for young people with persistent physical symptoms in primary care. Exploration of effect and health literacy characteristics among users	38
SATURDAY OCT. 5TH SECOND SESSION 14:00-14:30	39
Optimizing Community Mental Health Teams (CMHTs) Implementation: Key Factors to Consider in Central and Eastern Europe.....	39
Integrating digital mental health services into a comprehensive model of mental healthcare delivery	39
Bridging the Gap for Patients Waiting for Psychotherapy: Focus Groups for the Agile Development of the QUATEMAR App with Tele-Coaching	40
Feasibility, acceptability and effectiveness of smartphone-based virtual reality relaxation for a psychiatric population: an explorative pilot study	41

Effectiveness of a Multimodal Online Psychotherapy Approach for Armenian Patients
Abroad: Integrating CBT, Gestalt, Humanistic-Existential Therapy, and Brainspotting .. 42

Assessing Baseline Characteristics for the PrevANS Anxiety Prevention Trial in Portugal
and Spain..... 43

Evaluating the efficacy of different cognitive-behavioral therapy protocols for
procrastination in an online group setting: a randomized controlled trial 44

The Importance of Narcissism and Parental Mediation on Problematic Adolescents’ Self-
Disclosure on SNS..... 45

Digitally-assisted intervention with online coaching for the EarlyChildhood Educator
teams: a randomized controlled trial 46

SATURDAY OCT. 4TH | FIRST SESSION 10:30-11:00

What do the therapists think of blended intervention for Adjustment Disorder? Preliminary results of a qualitative study

Soledad Quero Castellano¹, Sara Fernández-Buendía¹, Laura de la Coba¹, Paloma Goizueta-Pourthé¹, Silvia Martínez-Soler¹

¹ Universitat Jaume I, Spain

Introduction. The blended format combines the use of Internet-based interventions with face-to-face elements. Some authors suggest that this treatment format could be suitable for Adjustment disorder (AjD). Although previous studies have shown the acceptability of these interventions by patients, we still know little about the opinion of the therapists. The aim of this qualitative study was to explore the feasibility (according to the therapists' perspective) of incorporating into clinical practice: (a) the blended format for AjD, and (b) a new specific blended intervention for AjD that combines the use of an Internet-based treatment with videoconferencing sessions every 10-12 days and lasting 30 minutes.

Methods. A total of 8 therapists (mean age = 35.88, SD = 8.18) participated in this study, 75% were female. A focus group was conducted in two parts: (1) in the first part, participants were asked about the feasibility of implementing blended interventions for AjD in general, and (2) in the second part, a video clip explaining a specific internet-based treatment for AjD was shown to the therapists for their opinion on its feasibility. Transcripts of the focus group were analysed following the Consensual Qualitative Research (CQR) methodology.

Results. This study is still in progress. According to previous studies, it is expected that the therapists will show positive attitudes towards the implementation, in clinical practice, of the blended format.

Conclusions. The results of this study will help to provide more information on the feasibility of implementing a blended therapy for AjD in the clinical setting.

Enhancing Work Self-efficacy and Occupational Well-being in Young Employees by Targeting Meta Self-efficacy: a Protocol for a Randomized Controlled Trial of an Internet Intervention

Jan Maciejewski¹, Ewelina Smoktunowicz¹

¹ SWPS University, Poland

Introduction: Supporting young employees in navigating workplace demands requires a focus on personal resources. While self-efficacy is a crucial resource, it is context-specific, which limits its applicability in changing work environments. To address this, we propose meta self-efficacy—the ability to leverage sources of self-efficacy to build self-efficacy across various challenges. We outline an intervention co-creation study and a randomized controlled trial (RCT) to test its effectiveness.

Methods: The co-creation study will include three focus groups. The first group (N = 8) will discuss strategies for enhancing self-efficacy, occupational well-being, and intervention needs. For the second and third groups, we will invite a new sample (N = 8) to evaluate and refine a prototype intervention, identifying barriers and facilitators to engagement. The trial will use a two-arm parallel design (N = 600) to assess the impact of enhancing meta self-efficacy. Participants will be randomly assigned to either the meta self-efficacy internet intervention or an active placebo condition, with assessments at posttest, 3-, and 6-month follow-ups. The efficacy will be analyzed using the Linear Mixed Effects Model with the ITT principle.

Results: We expect significant improvements in the experimental condition in work self-efficacy (primary outcome), meta self-efficacy (manipulation check), work stress, job affective well-being, and sustainable employability (secondary outcomes).

Conclusions: Co-creation is expected to safeguard intervention usability, promoting adherence and engagement. If effective, the meta self-efficacy intervention could serve as a valuable tool for supporting young employees in diverse workplaces.

Rule-based chatbot application for adolescents with anxiety: a non-randomized pilot and feasibility study

Smiti Kahlon¹, Robin Gulseth¹, Tine Nordgreen¹

¹ Haukeland University Hospital, Norway

Introduction: Anxiety is one of the most common psychiatric disorders and the symptoms typically onset in adolescence. The anxiety symptoms may persist into adulthood, leading to comorbid disorders, poorer life quality and function impairments. Scalable early

interventions may reduce the negative impact anxiety symptoms have on adolescents. The study evaluates the feasibility of a novel, digital health intervention for adolescents with anxiety symptoms.

Methods: This study investigated the feasibility and preliminary clinical effects of an 8-week digital intervention in an open pre - post and 1- and 3-month follow up study. The intervention consisted of a rule-based chatbot, combined with therapist-guidance. A total of 25 adolescents aged 13 to 16 participated.

Results: The intervention showed high adherence rates, with 72 % of participants completing all modules. The intervention demonstrated high acceptability and credibility, with all 17 respondents reporting that they would recommend the app to a friend with similar challenges. Despite promising feasibility outcomes, self-reported clinical effects were limited, with no improvement in self-reported measurements of anxiety and depressive symptoms, nor functional impairment at long-term. Parent-reported measurements indicated improvement in anxiety and depressive symptoms , as well as improvement in daily functioning.

Discussion: The findings support the feasibility of a rule-based chatbot intervention for adolescent with anxiety symptoms. However, the lack of symptom reduction indicates the need for app refinement before progressing to a randomized controlled trial. Adjustments include enhancing engagement in the active therapeutic components of the app such as exposure tasks, cognitive restructuring and enhancing parental involvement.

Beyond the Ivory Tower: Community-Based Participatory Research for Developing a Digital Psychological Intervention to increase Resilience and Connect Vulnerable Citizens in Europe (RECONNECTED)

Annet Kleiboer¹, Saskia Hindemith², Michaela Kaneva¹, Kathrin Schopf², RECONNECTED Consortium³

¹ Vrije Universiteit Amsterdam, The Netherlands

² Ruhr University Bochum, Germany

³ RECONNECTED Consortium

Introduction: RECONNECTED is a Horizon Europe-funded project designed to provide vulnerable groups in nine European countries—youth, older adults, individuals with low socioeconomic status, migrant populations—with a digital psychological intervention to enhance mental health literacy, foster community participation, and build psychological resilience. To ensure the intervention is relevant, acceptable, and ethical, systematic involvement of stakeholders through participatory research is essential.

Methods: A participatory research protocol is developed, guided by the framework of Leask and colleagues (2019). The framework includes the following steps: 1) planning co-creation, 2) conducting co-creation, 3) evaluation of the co-creation process and the outcomes, and 4) reporting of the co-creation process and the outcomes. The same participatory research is applied in each of the European countries.

Results: (1) Planning: PProblem: youth, older adults, migrants, low SES; Objective: enhancing psychological resilience, mental health literacy, community participation; Design: Participatory Health Research; end-Users: vulnerable group dependent on site; Co-creators: end-users and other stakeholders; Evaluation: co-creators complete an anonymous feedback form, researchers complete an established protocol; Scalability: iteration of adaptation & optimization prior to upscaling. Recruitment of stakeholders was done via purposeful sampling. 2) Co-creative activities and manifestation of ownership in workshops, 3) Evaluation of the workshops and a process evaluation alongside the trial, 4) Reports will be written and published about the co-creation process, the trial, and the process evaluation.

Conclusion: This poster outlines how key principles and recommendations of the framework will be applied in the co-creation process and presents initial findings of the stakeholder workshops.

Digital moms in South European Countries: Acceptability and perceived barriers and facilitators of digital solutions uptake for perinatal mood/anxiety disorders in Italian, Portuguese and Spanish perinatal women

Ana Fonseca¹, Elisa Mancinelli², Veronica Martínez-Borba³, Mariana Branquinho¹, Silvia Salcuni², Jorge Osma³

¹ University of Coimbra, Portugal

² Department of Developmental and Social Psychology, University of Padova, Italy

³ University of Zaragoza, Health Research Institute of Aragón, Spain

Introduction: Despite the prevalence and impact of perinatal mood and anxiety disorders, mental help-seeking remains low. Digital mental health solutions offer an opportunity to increase access to perinatal care. This study aims to explore cross-cultural perspectives (Portugal, Spain and Italy) about women's views, preferences and overall attitudes towards digital screening, prevention and intervention tools, informing the integration of digital and in-person care.

Methods: A cross-sectional online survey including adult women in the perinatal period was conducted in Portugal (n=364), Spain (n=115), and Italy (n=278); women's perceived

acceptability of digital perinatal mental health screening, prevention and intervention solutions, and perceived barriers and facilitators for its uptake were assessed.

Results: Portuguese women reported higher digital proficiency than Spanish and Italian women ($p < .001$). While digital screening and prevention tools were acceptable in all three countries, Italian and Spanish women showed a stronger preference for in-person interventions ($p < .001$). Barriers (e.g., privacy concerns, lack of personalization) and facilitators (e.g., ease of use, availability) of digital solutions' uptake were differently valued by women in different countries. Italian and Portuguese women more strongly perceive that digital solutions can help to overcome help-seeking barriers (knowledge, attitudinal and structural), compared with Spanish women.

Discussion: Overall, Portuguese women appear the most open and receptive to digital solutions for screening, prevention, and intervention, although deemed acceptable in all three countries. To enhance the adoption of digital health solutions, these should be tailored to country-specific preferences, addressing concerns and leveraging key facilitators to improve accessibility and their real-life utilization.

Mobile vs. large screen in web-based internet interventions - does it make a difference?

George Vlaescu¹, Victoria Aminoff¹, Gerhard Andersson¹

¹ Linköping University, Sweden

We have collected and will analyse data from a few internet interventions delivered via the web-based iterapi platform, regarding the usage of devices by the participants when logging in to the platform. While the interface layout is responsive and the viewer experience is very rich both for participants using devices with large screens (computers, tablets) and those using mobile phones, it might be interesting to find out if there are any differences between these two categories of users regarding a number of aspects: number of logins, number of opened modules and answered worksheets, achieved intervention effects. Does using a smaller screen influence the delivery of the intervention or not?

Vladimir Ivanov. Uncertain Allies? Probing the Relationship Between Gaming Experience, Gender, Visuospatial Ability, and VR Memory

Vladimir Ivanov¹, Gert Jan de Boer¹, Elena Sofia Silva¹, Jadwiga Bożek¹, Eva Ansems¹, Leon Anema¹, Oscar Delgado Rueda¹, Eriko Fukuda¹, Phillip Brown¹, Alexandra Hering¹, Mercedes Almela¹

¹ Tilburg University, The Netherlands

Introduction: Virtual Reality (VR) interventions are widely used in healthcare but yield variable outcomes. Visuospatial (VS) ability may moderate performance, as strong VS skills can facilitate navigation in suboptimal VR contexts. Additionally, gaming experience may confound or moderate this relationship by shaping users' adaptation to virtual environments.

Methods: Sixty adult participants (≥ 18 years, normal or corrected vision, no severe motion sickness) will be randomly assigned to one of three VR conditions: (1) good audio/good motion, (2) good audio/poor motion, or (3) poor audio/poor motion. All will complete a Method of Loci-based memory task (recall, cued recall, recognition). VS ability will be measured via the Wechsler Block Task, Wayfinding Questionnaire, and Wechsler Visual Reproduction. Gaming behavior (frequency, duration, genres) will be collected by self-report.

Planned Analysis: Multiple linear regressions will test whether VS ability and gaming predict memory performance, with dummy-coded conditions for group comparisons. Interaction terms (VS \times condition, VS \times gaming) will assess moderation. Cybersickness and gender will serve as covariates.

Expected Outcomes: It is hypothesized that higher VS ability will buffer participants from negative effects of poor motion or audio quality, and gaming experience may reinforce or alter this effect. Findings could inform user centered VR-based interventions incorporating visuospatial skills to improve memory outcomes in the method of LOCI.

Emotional effects of a brief child-robot interaction to teach school-aged children a relaxation exercise

Carlos Carona¹, Ana Barata Lopes², Beatriz Ribeiro², Sara Rodrigues³, Urbano Nunes²

¹ Center for Research in Neuropsychology and Cognitive-Behavioral Intervention, University of Coimbra, Portugal

² Institute of Systems and Robotics, University of Coimbra, Portugal

³ Faculty of Psychology and Educational Sciences, University of Coimbra, Portugal

Introduction. Although current evidence suggests that child-robot interaction (CRI) may reduce distress and increase positive affect in children, most studies rely on very small samples and on interventions based on free interaction or on the use of the robot as a distractor. Therefore, this study examined changes in the emotional reactions of children following a brief CRI, where the robot NAO individually taught them a breathing exercise for relaxation.

Method. Eighty-eight Portuguese fourth graders (Mage = 8.5; 58.4% girls) participated in the study. These children completed a simplified version of the "Emotional Assessment

Scale” before and after engaging in a structured 10-minute CRI. In this CRI, the robot NAO taught them the 4-7-8 calm breathing exercise through guided imitation.

Results. In comparison to baseline scores, children reported increased levels of surprise [$t(87) = -7.05, p < .001$], enchantment [$t(87) = -7.81, p < .001$], astonishment [$t(87) = -5.92, p < .001$] and admiration [$t(87) = -6.51, p < .001$], and decreased levels of sadness [$t(87) = 2.52, p = .01$], worry [$t(87) = 1.95, p = .05$], irritability [$t(87) = 2.09, p = .04$], and nervousness [$t(87) = 2.67, p < .01$]. Similar changes were observed when combining positive and negative emotions into broader “positive” [$t(87) = -9.84, p < .001$] and “negative” [$t(87) = 3.44, p < .001$] emotional states.

Conclusions. These findings suggest that a developmentally appropriate relaxation exercise taught by the NAO social robot may be effective in improving emotional states in typically developing school-aged children, potentially through coping skills training.

Overview and content of a Chatbot-Based CBT Intervention for Youth adapted for use in Lithuania

Livija Ziemienė¹, Kenneth Carswell², Austėja Dumarkaitė¹, Anne M. de Graaff², Adomas Gražinis¹, Ramunė Serapinaitė¹, Wietse Tol³, Ulrich Reininghaus⁴, Evaldas Kazlauskas¹

¹ Center for Psychotraumatology, Institute of Psychology, Vilnius University, Lithuania

² Department of Mental Health, Brain Health and Substance Use, World Health Organization, Geneva, Switzerland

³ Department of Public Health, University of Copenhagen, Denmark

⁴ Department of Public Mental Health, Central Institute of Mental Health, Mannheim, Germany

Introduction: Young people navigate a critical phase of life characterized by numerous challenges, including academic pressures, interpersonal conflicts, financial insecurity, and identity formation. These factors contribute to increased vulnerability to mental health issues. Given the urgent need for accessible and engaging psychological support, digital interventions offer a promising solution by delivering scalable, evidence-based tools directly to youth. This study presents the STARS intervention to support youth mental health.

Methods: The STARS (Scalable Technology for Adolescents and Youth to Reduce Stress) intervention, originally developed by the World Health Organization, was adapted for Lithuanian youth within the Horizon Europe ADVANCE project. This transdiagnostic CBT-based chatbot intervention aims to alleviate psychological distress.

Results: This presentation will provide an overview of the adapted STARS chatbot. The STARS chatbot delivers a structured 10-session program, with each session lasting 10–20

minutes. It provides psychoeducation on stress and equips users with CBT-based coping techniques and problem-solving strategies. Additionally, the intervention includes five brief (15-minute) support calls conducted by trained and supervised non-specialist "e-helpers" to enhance engagement and adherence.

Conclusions: Addressing youth psychological distress requires innovative, evidence-based solutions. This presentation will highlight the STARS intervention's content, technological features, and implementation process. Future research will focus on evaluating its feasibility, effectiveness, and potential for large-scale deployment.

Mental health in the digital age: the needs and expectations of young adults

Toon Colman¹, Tom Van Daele¹², Sylvie Bernaerts¹

¹ Thomas More University of Applied Sciences, Belgium

² Queen's University Belfast, United Kingdom

Introduction: The internet, including social media platforms like TikTok and Instagram, is increasingly used by youth to seek mental health advice and peer support. However, this also presents risks, including misinformation and privacy breaches. These issues align with broader ethical concerns in telepsychology, such as confidentiality and the digital footprint of both users and professionals. This study investigated current mental health questions and concerns among young adults (aged 18-25), aiming to explore how professionals and policymakers can effectively engage with them online while balancing accessibility and credibility.

Methods: This mixed-methods study combined a survey (n=547) with 2 focus groups (n=12). The quantitative data identified prevalent mental health topics and digital behaviors among youth, whereas the qualitative data provided nuanced insights into their expectations for online mental health content.

Results: Findings indicate that young adults seek information, advice, and accessible, affordable care to support themselves and others. They value accessible, visually engaging, and relatable content but are wary of overly promotional or impersonal messages. They seek centralized, reliable resources but struggle to discern credible information online. Social media platforms like TikTok can foster community but their informal nature also challenges professional intervention. Caution is nevertheless warranted as results may not generalize outside the study's sample, which included many students and individuals with prior mental health service use.

Conclusions: Psychologists must navigate ethical dilemmas, including maintaining professional boundaries and ensuring data privacy. This study highlights the need for

evidence-based strategies for social media engagement, offering guidance for training and policymaking in telepsychology.

SATURDAY OCT. 4TH | SECOND SESSION 14:30-15:00

Increasing adherence to an internet-based intervention for the treatment of Prolonged Grief Disorder

Laura De la Coba Cañizares¹, Daniel Campos², Jorge Grimaldos¹, Sara Fernández-Buendía¹, Mar Molés³, Mireia Guimerá¹, Alba López-Montoyo¹, Soledad Quero^{1,4}

¹ Department of Basic, Clinical Psychology and Psychobiology, Universitat Jaume I, Castellón, Spain Castellón

² Department of Psychology and Sociology, Universidad de Zaragoza, Zaragoza, Spain

³ Faculty of Health, Universidad Internacional de la Rioja, La Rioja, Spain

⁴ CIBER de Fisiopatología de la Obesidad y Nutrición (CIBEROBN), Madrid, Spain

Increasign adherence to an internet-based intervention for the treatment of Prolonged Grief Disorder. Oral Presentation "Introduction. Internet-delivered cognitive-behavioral therapies (iCBT) have shown to be a cost-effective way to reach more people and overcome geographical barriers. However, low adherence and high drop-out rates are the most common challenge associated with iCBT. This is especially the case for the treatment of Prolonged Grief Disorder (PGD). Despite the effectiveness shown by iCBT, it seems that people with this problem, need more therapeutic support to cope with and emotionally process the death of a significant loved one. The objective of this presentation is to summarize the results obtained in previous studies regarding drop-out rates and participants' experiences who received an iCBT for PGD (GROW) and propose alternatives to increase adherence to this type of cost-effective interventions: a blended format with the support of a therapist via videoconference and the use of an App including EMAs and EMIs to support the iCBT program. Methods. The two alternatives to increase adherence to GROW will be described. In the case of the App development, the specifications derived from 2 focus groups (one with patients with PGD who received the program and one with therapists experienced in the treatment of grief) exploring the needs and preferences of patients and therapists on the use of smartphones for psychological treatment will be presented. Results. This study is still in progress. Conclusions. The results of this study will help to provide relevant information to be considered to include automated support and to increase adherence to iCBT, specifically in the case of PGD. Prolonged Grief Disorder (PGD), Internet-delivered cognitive-behavioral therapies (iCBT), Adherence.

Post-pandemic depression, anxiety, and well-being among an adult sample seeking emotional support through the web-based intervention “Well-being Online”

Leivy Patricia González-Ramírez¹, Reyna Jazmín Martínez-Arriaga², Paulina Erika Herdoiza-Arroyo³, Said Jiménez¹, Joel Omar González-Cantero², Marinna S. Mensorio⁴, Adrián Antonio Cisneros Hernández², Alejandro Dominguez-Rodriguez⁵

¹ Tecnológico de Monterrey Mexico

² Universidad de Guadalajara

³ Universidad Internacional del Ecuador

⁴ Independent research

⁵ University of Twente

Introduction. COVID-19 increased anxiety and depression worldwide, highlighting the importance of well-being in psychopathology prevention. “Well-Being Online” is a free online intervention to promote well-being and reduce anxiety and depression symptoms. This study examines post-pandemic depression, anxiety and psychological well-being in Mexicans from “Well-being Online” baseline data.

Method. Through a cross-sectional and descriptive design, depression, anxiety, and psychological well-being were analyzed. Data were collected using The Center for Epidemiologic Studies Depression Scale, The Generalized Anxiety Disorder 7-item Scale, and the Warwick-Edinburgh Mental Well-Being Scale. Means, standard deviations, proportions and confidence intervals were calculated using the R package.

Results. Depression (n=1921) score was M=49.6, SD=29.4, 95% CI [48.3, 50.9]. The proportion above the mean was 0.43, 95% CI [0.41, 0.45]. The most reported symptoms were anhedonia (0.48, 95% CI [0.46, 0.51]) and dysphoria (0.45, 95% CI [0.44, 0.48]). Anxiety (n=2030) score was M=10.6, SD=5.0, 95% CI [10.4, 10.9]. The proportion of individuals with moderate (>10 points) and severe (>15 points) anxiety levels was 0.50, 95% CI [0.48, 0.52] and 0.17, 95% CI [0.16, 0.19], respectively. Mental well-being (n=1921) had a M=42.3, SD=11.5, 95% CI [41.7, 42.8]. The proportion of individuals with high well-being levels (above the mean) was 0.47, 95% CI [0.45, 0.49].

Conclusion. Depressive symptoms (anhedonia and dysphoria) were reported by half of the participants. Moderate and severe anxiety was reported by two-thirds of the sample. In contrast, well-being emerged as a protective element. Identifying psychological needs in post-pandemic allows the development of targeted interventions.

A complex system approach towards Resilient and CONNECTED vulnerable European communities in times of change: study protocol for a full factorial trial in nine European countries

Claire van Genugten¹, Michaela Kaneva¹, Eline Henrotte¹, Heleen Riper¹, Annet Kleiboer¹, RECONNECTED Consortium²

¹ Vrije Universiteit Amsterdam, The Netherlands

² RECONNECTED Consortium

Introduction: Europe is undergoing significant changes due to the fourth industrial revolution, urbanization, aging populations, migration, and global challenges such as climate change, energy transition, and geopolitical unrest. These transitions pose risks to citizens' feelings of safety and wellbeing, especially for vulnerable groups like those with low socioeconomic status, immigrants, youth, and the elderly.

Aim: The primary objective is to investigate if a digital support system, including mental health literacy to create mental awareness, social prescription to increase social and community participation, and personalized micro-interventions to increase psychological resilience, can enhance the mental wellbeing of these vulnerable citizens. The second objective is to develop implementation strategies that balance effectiveness, efficiency, cost-effectiveness, and scalability of the digital support system.

Methods: The study is part of the RECONNECTED project (www.reconnected-project.eu) and follows the Multiphase Optimization Strategy (MOST) framework. It includes nine 2×2 factorial randomized controlled trials (n=256, total n=2,304) across vulnerable populations in Europe. All participants will receive access to the digital support system, including the mental health literacy intervention, and will be randomized to receive up to two additional components (i.e., social prescription and personalized micro-interventions). The design evaluates the individual and combined effects, with mental well-being as the primary outcome.

Results: Recruitment starts in January 2026, results are expected by summer 2028.

Discussion: Following the MOST framework, the results of the trials will be evaluated against predefined optimization criteria, determining the most optimal intervention version based on impact, efficiency, cost, and scalability. The digital support systems can potentially provide locally adapted and personalized intervention tools for vulnerable populations that are often challenging to reach through conventional mental health interventions.

User Design of UNISALUD, a platform for university students reduce consumption of ultra processed food and increase physical activity

Adrián Antonio Cisneros Hernández¹, Alejandro Domínguez-Rodríguez², Itzel Refugio Alvarado-Ávalos¹, Joel Omar González-Cantero¹, Leyna Priscila López-Torres¹, Fátima López-Alcaraz³, Estefanía Gasca-Suárez¹, Alexandra Valadez¹, Fabiola Macías-Espinoza¹

¹ Universidad de Guadalajara, Mexico

² University of Twente, The Netherlands

³ Universidad de Colima, Mexico

Introduction: University students have reported that the pandemic has had a significant impact on their lifestyles. One alternative approach that has been demonstrated to be effective in this population is the implementation of Internet-based interventions, which have been shown to improve lifestyle outcomes among university students. The objective of this study was to identify, through user experience, the preferences of university students regarding a platform to reduce ultra processed food consumption and increase physical activity.

Methods: In-depth interviews with 12 university students were conducted. A mixed approach was utilized, integrating descriptive statistical analysis for quantitative data and thematic analysis for the qualitative data derived from in-depth interviews. The thematic analysis method was employed. This method involved organizing the participants' responses into different categories according to the information provided. The interviews were transcribed and coded using MAXQDA.

Results: It was determined that the pandemic had an impact on students' mental health, nutrition, and physical activity. It was also determined that providing assistance through a platform could facilitate access to digital tools adapted to the needs of students. These tools should have an intuitive design, short sessions, personalized diagnostics, and structured food and exercise plans.

Conclusions: The results of the study indicated a clear need to develop an intervention designed to assist university students in enhancing their nutrition, physical activity, and psychological well-being.

How do parents look for adolescent mental health information online and what do they think of what they find? A qualitative study to inform the design of an online intervention for parents

Natalia Kika¹, Maria Loades¹, Jeffrey Lambert¹, Nina Higson-Sweeney¹, Shirley Reynolds²

¹ University of Bath, United Kingdom

² University of Reading, United Kingdom

Introduction: Parents play a key role in supporting adolescents with low mood, yet many do not know how to recognise symptoms, how to offer support, or where to seek further help. To inform the development of a brief, parent-directed and internet-delivered intervention for adolescent low mood, this qualitative study explored 1) where and how parents look for help online when they become worried about their adolescent's mental health; 2) what 'key message' parents would find most useful as the focus of the intervention.

Methods: Semi-structured interviews using open-ended and think-aloud questions have been conducted with 11 UK-based parents of adolescents aged 12-18 so far. The final sample will consist of 15-20 parents, and transcripts will be analysed using reflexive thematic analysis.

Results: Preliminary findings show that parents tend to start with a general online search, and use different websites for different purposes, e.g. medical websites for information on symptoms, or parent forums and charities for peer support. Parents expressed the need for guidance on how to the topic of mental health with their adolescent, and how to distinguish low mood symptoms from typical changes associated with adolescence.

Conclusion: The final findings will inform two key aspects of the intervention development process: 1) selecting the key message to be conveyed to parents; 2) finding out where and how to embed the intervention online once it is developed and tested so that it reaches parents effectively. Next steps for the intervention prototype development and pilot study will be outlined.

Culturally adapted universal digital parenting intervention for immigrant families in Finland

Kaisa Mishina¹, Malin Kinnunen¹, Altti Marjamäki¹, André Sourander¹

¹ University of Turku, Finland

Introduction: Parenting programs are typically based on Western cultural norms, which may leave many immigrant families without proper access to beneficial services. To ensure suitability and effectiveness, parenting programs need to be culturally adapted before being implemented in diverse communities, offering support in the family's own language and considering cultural factors. This study aims to develop and culturally adapt an effective universal intervention suitable for immigrant families. The goal is to improve service accessibility while respecting cultural diversity in parenting.

Methods: The intervention will be adapted for Arabic, Farsi/Persian, Somali, and Kurdish-speaking families, which are one of the most typical immigrant backgrounds in Finland from outside Europe. The study includes: 1) interviews on immigrant families' parenting experiences in Finland, 2) cultural adaptation of the program using co-creative methods, 3) a randomized controlled waitlist-group trial to assess effectiveness, and 4) plan for nationwide implementation. The adaptation process involves representatives from target communities, professionals working with immigrant families, researchers and program developers.

Results: The study will provide insights into immigrant families' parenting experiences and evaluate the adapted program's effectiveness. Findings will support the development of inclusive and culturally responsive parenting services.

Conclusions: By offering accessible parenting support in families' native languages, this study addresses gaps in Finland's service system, which is largely based on Western norms. In the long term, it aims to promote low-threshold, culturally sensitive family services.

The role of psychological flexibility and psychological factors in chronic pelvic pain among women: a correlational study

Chiara Manna¹

¹ Catholic University of Milan, Italy

Introduction: Chronic Pelvic Pain (CPP) is a multifactorial condition that affect in many ways the daily life of patients suffering from it. Different psychological factors demonstrated to be associated with the genesis and maintenance of CPP. Among these: anxiety, depression and catastrophizing showed the strongest evidence. Less is known about the role of the Psychological Flexibility (PF) model. Thus, the aim of this study is to explore the relationship between the PF domains, psychological distress, pain and quality of life in patients with chronic pelvic pain.

Method: 114 women with a diagnosis of chronic pelvic pain were included in this study. Participants completed online self-report measures to assess psychological distress (anxiety, depression, stress), Psychological Flexibility, Pain interference and Quality of life.

Results: Psychological distress and Psychological Flexibility showed significant association with pain interference. Other PF dimension related to pain interference were: self as context, defusion and values. Physical Quality of life showed significant association with Experiential avoidance and Lack of values clarity, while Mental Quality of life was associated with Psychological Inflexibility and Self as content.

Conclusion: Psychological distress and Psychological Flexibility have a role in pain perception and its interference of patient's daily life, affecting also physical and mental quality of life of CPP patients. These factors should be addressed in psychological interventions designed to support the treatment of CPP.

What do therapists think about AI and data-driven methods in mental healthcare? A mixed-methods investigation

Anna R. Hudson¹, Eva Koot¹, Matej Wilting¹

¹ Tilburg University, The Netherlands

Introduction: There is a lot of excitement in academia over the use of technology, AI, and data-driven methods in personalising and improving psychotherapy, but less knowledge about how clinicians (the people who will actually use such tools) think of such things. Preliminary evidence suggests that therapists are intrigued by but still somewhat sceptical of the applicability of data-driven methods such as network models; very little evidence currently exists on therapists' attitudes to AI chatbots in mental healthcare. Furthermore, there is a dearth of evidence regarding what kind of support therapists feel that they would need in order to successfully use such tools.

Methods: This study will conduct a mixed-methods investigation with therapists who use the Minddistrict e-mental healthcare app as part of blended psychotherapy. The first part will be a survey investigating how specific therapist characteristics may predict interest in AI and network models in mental healthcare. Follow-up semi-structured interviews will provide richer and more detailed information about therapist attitudes, including specific use cases and what sort of support/training they would need.

Results/conclusions: Data from the survey will be used to describe the current state of interest/knowledge amongst Dutch therapists regarding modern technology, AI chatbots, and network models. Insights gained from the qualitative interviews will provide in-depth knowledge of therapists' hopes, concerns, and misconceptions regarding AI chatbots and network models, which could be used to improve the eventual implementation of such tools.

Brazilian linguistic and cultural adaptation of the web-based psychological intervention Online Well-being (Bem-estar Online): Phase 1.

Marinna Simões Mensorio¹, Antonio Carlos Santos da Silva², Rogéria Lourenço dos Santos³, Paulina Erika Herdoíza-Arroyo⁴, Leivy Patricia González-Ramírez⁵, Adrián Antonio Cisneros Hernández⁶, Reyna Jazmín Martínez Arriaga⁶, Joel Omar González-Cantero⁷, Alejandro Domínguez-Rodríguez²

¹ Independent Researcher, Brazil

² Federal University of Bahia, Salvador, Brazil

³ Independent Researcher, São Paulo, Brazil

⁴ Universidad Internacional del Ecuador, Quito, Ecuador

⁵ Tecnológico de Monterrey, Guadalajara, Mexico

⁶ Universidad de Guadalajara, Guadalajara, Mexico

⁷ Centro Universitario de los Valles, Universidad de Guadalajara, Mexico

Introduction: Anxiety and depression, even at moderate levels, can impair individual health. Web-based psychological interventions have proven to be a viable treatment alternative; however, they often lack an efficient adaptation process considering diverse cultural components. From 2023 to 2024, the Online Well-being Program was developed, consisting of 10 self-administered modules aimed at promoting well-being and reducing symptoms of anxiety and depression in various Latin American and European populations.

Objective: This study describes the first phase of the cultural adaptation of this intervention for Brazil, based on the protocol by Salamanca et al. (2019), which emphasizes culturally sensitive structures.

Method: In phase 1, a preliminary cultural translation and adaptation were conducted, supported by three researchers with backgrounds in psychology and linguistics from different regions of Brazil. The process involved reviewing the translated content throughout 2024, where each researcher reviewed separately and then collectively.

Results: Adjustments included: (a) translations from Spanish to Portuguese; (b) rewriting examples (personal stories, suggestions, stereotypes); (c) inclusion of Brazilian expressions (ex: “Vamos lá!”); and (d) redefining more appropriate images for the Brazilian population.

Conclusions: The importance of performing cultural adaptation from the outset of any transcultural intervention was emphasized. Modifications were made to align the program with the realities and population of Brazil, considering the various accents and expressions from different regions, aided by the diversity of the researchers involved. The following steps aim to evaluate the intervention using specific questionnaires and assess user satisfaction with the program.

Development and status of the Swedish National Quality Register for internet-delivered psychological treatment, SibeR

Pontus Bjurner¹, Cecilia Svanborg¹, Amanda Simonsson², Sarah Vigerland¹, Gerhard Andersson³, Viktor Kaldö^{1,4}

¹ Karolinska Institutet and Stockholm County Council, Sweden

² Uppsala University, Sweden

³ Linköping University, Sweden

⁴ Linnaeus University, Sweden

Introduction: SibeR was launched in 2015, at the same time as a national platform for digital support and treatments became available for all 21 regions in Sweden. The aim is to provide a basis for systematic evaluation, development of and research on internet-delivered healthcare treatments.

Methods: Treatments include a wide range of defined interventions for mental illness as well as behavioral medical conditions in psychiatry, primary care and somatic care for patients of all ages. The indications are expanding in line with implementation in regular care. The quality measures apply to diagnostic assessment, availability, completion rate and treatment effect. Registry goals are to increase: 1) Access to effective psychological treatments in a reasonable time, 2) Equal quality of care, and 3) Treatment compliance.

Results: There are now about 30 000 treatments registered in SibeR. The registry has developed standards for outcomes measures, definitions of response, online interactive reports, checklists for program and care processes, and structured informatics to help the regions to gather data for digital psychological treatments. SibeR's transparency around treatments, processes and effects contributes to the development of better programs and care processes. We have learned about factors for sustainable implementation.

Conclusions: It is feasible to build a national system for process and outcome monitoring of internet-based psychological treatments in clinical practice. SibeR is increasingly used to support the implementation of ICBT, quality assurance and research, and to enhance ICBT in clinical practice.

Cultivating Compassion with Virtual Reality: Preliminary Data from a RCT

Giulia Parola¹, Catherine Andreu², Valérie Bonnelle², Desirée Colombo¹, Ausiàs Cebolla³, David Glowacki^{2,4}, Rosa Baños^{1,3}, Maja Wrzesien^{1,3}

¹ Instituto Polibienestar, University of Valencia, Spain

² Intangible Realities Laboratory, Centro Singular de Investigación en Tecnoloxías Intelixentes, Universidade de Santiago de Compostela, Spain

³ Department of Personality, Evaluation and Psychological Treatment, University of Valencia & CIBER de Fisiopatología Obesidad y Nutrición (CIBEROBN), Instituto Carlos III, Valencia, Spain

⁴ ArtSci International Foundation, Bristol, United Kingdom

Compassion, a self-transcendent emotion characterized by sensitivity to suffering and commitment to alleviate it, fosters social connection and positive affect. While the effectiveness of virtual reality (VR) in various mental health-related domains is well-documented, its potential to elicit compassion remains understudied. This study presents a group-based immersive VR experience employing a “numadelic aesthetic” design, a non-representational approach, where participants are guided through a group meditation including exercises to foster connection. This randomized controlled study aims to examine whether this VR compassion-based group meditation (N=46) compared to compassion-based group meditation only (N=45) has the potential to enhance compassion and related variables. Preliminary results show that both groups exhibited a significant increase in positive affect and compassion, as well as a significant decrease in negative affect between pre- and post-assessment. Additionally, the VR group showed a significantly greater increase in connection and engagement during the meditation practice compared to the control group. In sum, although both experiences foster compassion and positive affect, integrating immersive VR technology with group compassion-based meditation practice may offer a novel pathway to creating more engaging ways for fostering compassion and interpersonal connection, important protective factors in mental health.

Optimizing a digital mental health intervention for youth with ADHD: youth perspectives on digital health promotion

Maren Storetvedt¹, Tine Nordgreen^{1,2}, Smiti Kahlon¹, Emilie Sektnan Nordby¹

¹ Helse Bergen HF, Norway

² University of Bergen, Norway

Introduction: Attention deficit hyperactivity disorder (ADHD) is a highly prevalent neurodevelopmental condition amongst children and youth. Digital interventions targeting

adolescents with ADHD show promising results and are considered a useful add-on to traditional care. Potential benefits of digital interventions include empowering individuals and families to self-help, reducing barriers for youths struggling with face-to-face treatment, easy accessibility, and applicability across different settings. Although there are many apps and technologies targeting ADHD in children and youth, the evidence-base of these interventions are lacking. Furthermore, few studies focus on the perspectives of adolescents, and person- and family-centered approaches are needed. This study will investigate how adolescents with ADHD perceive a therapist-led digital mental health app for ADHD, with intention to raise adolescents' perspectives on digital health promotion.

Methods: Semi-structured qualitative interviews will be conducted with N=16 adolescents diagnosed with ADHD who have completed a novel digital intervention. Braun and Clarke's reflexive thematic analysis will be applied, with a deductive approach. The person-based approach and Salutogenesis, an approach focusing on health promotion and wellbeing rather than disease, will be used as theoretical frameworks. The interview guide is inspired by the two main concepts of Salutogenesis: Sense of coherence (SOC) and General resistance resources (GRRs).

Results: Preliminary analysis indicates that the varying formats decrease the barrier of reading a lot of text to learn about the diagnosis. The therapist seems to function as a resource that promotes engagement along with digital aspects like reminders and streaks.

Evaluation of an informational website on learning disorders: a mixed-methods study

Olga Hermansson¹, Björn Witzel¹, Lior Weinreich¹, Gerd Schulte-Körne¹, Kristina Moll¹

¹ University Hospital of Ludwig Maximilian University of Munich, Germany

Introduction: LONDI (londi.de) is a German-language website designed to provide evidence-based information and tailored recommendations on learning disorders (dyslexia, dyscalculia) for parents, learning therapists, school psychologists, and welfare workers. This study evaluates the website's adoption, implementation, and maintenance according to the RE-AIM framework for health intervention evaluations. The aim of the study was to identify the characteristics of users who refuse to use the website, the reasons for adopting the website and whether the usage is maintained long-term.

Methods: The study employed a mixed methods approach, where the participants used the website independently for a month and then completed questionnaires on usability, visual aesthetics, content perception, satisfaction, perceived usefulness, expectations confirmation, and intention to use. Additionally, participants provided qualitative feedback.

Results: The multinomial logistic regression showed significant likelihood of poorer opinions of the website with increasing age and experience of the participants. The multiple regression analysis revealed that, for the informational pages, only content perception predicts the continuance intention ($R^2 = 0.52$, $p < .001$), while for the tailored recommendations tool, usability only weakly predicts further usage ($R^2 = 0.22$, $p = .001$). The thematic analysis revealed that the reasons for adopting the website were the practical need, time constraints, and interest. Most participants have deemed the website helpful and informative but stressed that the information was mostly for inexperienced parents and professionals and was limited to primary school children.

Conclusion: LONDI was deemed a helpful tool for both parents and professionals at the early stages of their journey.

Memory training with the Method of Loci in VR

Eva Ansems¹, Gert-Jan de Boer¹, Vladimir Ivanov¹, Elena Sofia Silva¹, Jadwiga Bożek¹, Leon Anema¹, Oscar Delgado Rueda¹, Philip Brown¹, Alexandra Hering¹, Eriko Fukuda¹, Mercedes Almela¹

¹ Tilburg University, The Netherlands

The method of Loci is a mnemonic technique that has been used to increase memory retention since ancient Greece. This method works by imagining items on a familiar route. The traditional way of use is time consuming and cognitively demanding, which may decrease the usability. Previous research about digitalization of this method with the use of Virtual Reality (VR) shows comparable results in memory recall to the traditional method of Loci.

For this study, participants engaged in with a VR-based method of Loci environment called the Kingdom of Loci. Here, memory performance was assessed with embedded tasks that measured free recall, cued recall and recognition. Before the participants had experienced the VR-environment, their memory was also assessed with traditional memory assessment like the Rey's Auditory Verbal Learning Test (RAVLT), the digit span, the mnemonic similarity task and the block task. The VR- environment was designed to be a memory training tool. By analyzing the results compared to other memory-related data, the effectiveness of the training tool could be evaluated.

By exploring VR and memory recall, the results of this study provide insights into the use of digital tools like VR for memory enhancement. Findings will help in the development of engaging cognitive technology.

Scaling mental health training with AVATALK: A virtual human approach

Ruben Decoster¹, Kelly Geryl¹

¹ Howest University of Applied Sciences, Belgium

Introduction: As demand for mental health services increases, scalable and effective training solutions for professionals are urgently needed. AVATALK, a two-year TETRA research project in Belgium at Howest University of Applied Sciences, conducted in collaboration with (mental) health organizations, aims to enhance the scalability and accessibility of training for mental health practitioners by providing virtual patients for consultation practice.

Methods: AVATALK utilizes AI-driven virtual humans capable of simulating realistic patient interactions through text, voice and 3D avatars. The platform integrates scenario-based learning and adaptive feedback mechanisms to enhance training effectiveness. The study follows an iterative co-design process with mental health professionals, ensuring that the training simulations align with real-world consultation challenges.

Beyond mental health consultation training, AVATALK also supports communication skill development in service-related roles (e.g., front desk assistants) and HR contexts (e.g., performance reviews).

Results: Early research with Applied Psychology students at Howest, practicing intake conversations with virtual patients, showed positive initial feedback on AVATALK's usability and learning experience.

Current data collection focuses on prototype testing, surveys, and expert feedback to assess user engagement, perceived effectiveness, and feasibility for large-scale adoption across various professional contexts

Conclusion: By leveraging virtual human interaction, AVATALK offers an innovative, scalable, and cost-effective avenue for training mental health professionals. This approach addresses the growing need for accessible mental health services, aligning with the theme of 'Resilience Through Innovation' and particularly relevant in today's challenging global context.

Effectiveness of digital mental health interventions for children and adolescents with anxiety and depressive symptoms: A systematic review and meta-analysis using ChatGPT4o

Stefan Lüttke¹, Florian Onur Kuhlmeier², Luise Bauch¹, Melina Rabe³

¹ University of Greifswald, Germany

² Karlsruhe Institute of Technology, Germany

³ Helios Clinic Schwerin, Germany

Introduction: Depression and anxiety are the most common mental disorders among children and adolescents. While numerous well-studied Digital Mental Health Interventions (DMHI) are already available for these indications in adulthood, few DMHI exist for children and adolescents. In particular, there is a lack of an up-to-date systematic overview of their effectiveness that also takes into account the influence of subgroups (e.g., guided vs. unguided DMHI, type of control group).

Methods: We included RCTs on the efficacy of DMHI for children and adolescents diagnosed with anxiety, depressive disorder, or clinically relevant symptoms. The literature search included PubMed, EBSCO-Host, APA PsycINFO, APA PsycArticles, among others. The risk of bias was initially determined by ChatGPT 4o using the RoB 2 tool and was subsequently assessed by two reviewers.

Results: A total of 30 studies (17 anxiety, 11 depression, 2 transdiagnostic) were included in this preregistered review (PROSPERO: CRD42023452852). 22 DMHIs investigated are CBT-based. The study revealed a combined effect size ($g = 0.65$ (95% CI)) for DMHI in treating anxiety and depression. Further analysis indicated a larger, though not statistically significant, effect for guided DMHI ($g = 0.75$, 95% CI) in contrast to unguided DMHI ($g = 0.42$, 95% CI). No substantial differences were observed for different control conditions.

Conclusions: DMHIs are effective treatments for anxiety and depressive disorders in children and adolescents, with an effect size comparable to that of face-to-face psychotherapy. However, we found a lack of RCTs investigating the effectiveness of the DMHI for internalizing disorders in youth compared to face-to-face psychotherapy or as a blended care.

Towards enhancing a psychoeducational Manual (PC) through a blended-approach: Ongoing development of a low-threshold, multilingual and mobile Intervention

Marco Gaßner¹, Elena Weigand¹, Andrea Hahnefeld¹, Volker Mall¹

¹ Technical University Munich, Germany

Introduction: Forcible displacement of people is at its highest level ever in June 2024 with 122.6 million individuals worldwide, among them 40% children. As there is an asymmetry between the number of help-seeking people and access to adequate prevention and psychosocial health care in many host countries, many children and their families suffer from the consequences of flight and displacement in the long term. A manualized psychoeducational parents' group ("Parents' College") to enhance resilience-promoting parent-child interaction is to be expanded with a mobile application (InterAPPtion), to improve the adherence of the participants and to make the evidence-based content available to a larger number of parents in a low-threshold and multilingual manner.

Methods: Following a participatory approach, we involve the target group in the development using the ADDIE model (Analysis, Development, Design, Implementation and Evaluation). Feedback will be generated in the form of semi-structured interviews in focus groups. As part of an exploratory approach, usage data will be collected in order to analyze the intensity, preferences and commitment of the participants. In addition, parental stress, self-efficacy and learning gains will be observed. Furthermore, child development and symptom load will be monitored at multiple measurement points.

Hypotheses: We assume that involving the target group during the pilot phase will allow for better adjustment of the treatment and that expanding the existing parent training with the mobile application will lead to increased adherence, more knowledge, better child development and a reduction in symptom burden.

Improving Neonatal Care Quality and Parental Involvement with the NeoParent App

Elke Baten¹, Mees Annelien¹, Wyverkens Elia¹, Cappelier Margaux²

¹ Howest University of Applied Sciences, Belgium

² AZ Oostende, Belgium

Introduction: Having a newborn in a neonatal intensive care unit (NICU) is overwhelming and emotionally stressful for parents. Providing clear, accessible information and promoting parental involvement in the care process, even when they are not physically present in the hospital, is crucial. The NeoParent app addresses these needs by facilitating communication between NICU professionals and parents, offering real-time updates on the baby's care, and milestone tracking. However, its sustainable adoption remains a challenge as NICU professionals must integrate the use of the app into their daily practice. This study explores whether a structured approach can support implementation and improve care quality.

Methods: NeoParent was implemented in the NICU at AZ Oostende hospital, using the 7E-model (Bambust, 2015). This model addresses seven levers, tailored to professionals' readiness to adopt digital tools: Enthuse, Encourage, Engage, Enlighten, Exemplify, Enable, and Experience. Pre- and post- implementation interviews with parents and NICU professionals assessed the impact of implementation on care quality and parental involvement.

Results: As implementation is ongoing, final results are not yet available. The presentation will provide descriptive data on the implementation process, including the number of professionals involved, timeline and key actions. Qualitative findings on the perceived effects of NeoParent on care quality and parental involvement will be discussed.

Conclusion: The 7E-model facilitated the sustainable integration of NeoParent into daily NICU practice, enhancing care quality and parental involvement. This could be a valuable approach to support the adoption of digital tools in other healthcare settings, ultimately optimizing care delivery and patient outcomes.

SATURDAY OCT. 5TH | FIRST SESSION 10:30-11:00

Unlocking Engagement: Recruitment Strategies and Participant Motivation in Online Mental Health Interventions – Insights from PrevANS

Cristina García-Huércano¹, Filipa Salomé², Sonia Conejo-Cerón¹³, Inês Rothes², Margarida Rangel Henriques², Patricia Moreno-Peral⁴

¹ Instituto de Investigación Biomédica de Málaga (IBIMA Plataforma Bionand), Spain

² Center for Psychology, Faculty of Psychology and Education Sciences, University of Porto, Portugal

³ Research Network on Chronicity, Primary Care, Prevention and Health Promotion (RICAPPS), Spain

⁴ Department of Personality, Assessment and Psychological Treatment, University of Málaga, Spain

Anxiety disorders are a major contributor to the global burden of disease and the second most prevalent mental health issue in Spain, only preceded by depression. While effective treatments for anxiety exist, access remains insufficient due to the high incidence of cases, resulting in significant social and economic costs. One of the goals of the World Health Organization is for 80% of countries to have at least two functioning national, multisectoral mental health promotion and prevention programs by 2030. However, funding and resources tend to focus on treatment rather than prevention, generating what is known as the “prevention gap”. To address this issue, prevANS was developed as an

evidence-based digital intervention designed to reduce the incidence of anxiety disorders in adults. Accessible via a mobile app or web-based platform, the intervention is personalized using the predictA risk algorithm, a tool validated in Europe that predicts the onset of anxiety disorders within the next 12 months. This study aims to evaluate the prevANS intervention through a parallel randomized controlled trial in Portugal and Spain. Nevertheless, recruiting participants for exclusively online studies presents specific challenges. This presentation examines both quantitative and qualitative data from a subsample of Spanish participants regarding (i) the channels through which they learned about the prevANS project and (ii) their motivation for participating in the trial, respectively. All data was collected via Google Forms and phone calls. Qualitative data was assessed using a thematic analysis approach.

A Protocol for Implementing Patient and Public Involvement(PPI) in a Randomized Controlled Trial of a Digital Intervention for Preventing Depression and Anxiety in Spain and Chile (Pandora App)

Carmen Garrido González^{1,2}, Sara Reyes Martín^{1,2}, María Rodríguez Ayllon¹, Sonia Conejo Cerón¹, Cristina González Monroy^{1,2}, Edelys Crespo Oliva^{1,2}, Abel Gómez Díaz¹, Santiago Galán³, Emiliano Rodríguez Sánchez⁴, Sandra Saldivia⁵, Francisca Muñoz Cobos³, Juan Ángel Bellón^{1,2,3}

¹ Biomedical Research Institute of Málaga and Nanomedicine Platform (IBIMA-BIONAND), Spain

² University of Málaga, Spain

³ Chronicity, Primary Care and Health Promotion Research Network (RICAPPS), ISCIII, Spain

⁴ Institute of Biomedical Research of Salamanca and Primary Care Research Unit of Salamanca, Spain

⁵ Department of Psychiatry and Mental Health, Universidad de Concepción, Chile

Digital interventions are promising tools for preventing depression and anxiety, but their success depends on user engagement and cultural adaptation. The Pandora App is a digital intervention designed to prevent depression and anxiety among adults aged 18 to 65 in Spain and Chile populations. This study presents the Patient and Public Involvement (PPI) in the development of the Pandora App, a digital intervention as part of a randomized controlled trial (The Pandora study). The citizen participation process will involve six structured meetings with key informants (non-professionals) and the target population. These meetings will include: (1) project introduction, (2) presentation of the app framework, (3) beta version pilot testing and qualitative and quantitative feedback collection, (4) participant recruitment for the RCT, (5) communication of preliminary results, and (6) media and community dissemination. Recordings of the semi-structured interviews will be used to analyze qualitative data (through thematic analysis), and the u-MARS questionnaire will be used for quantitative data to assess the usability and

engagement of the app's beta version. The expected outcome is to gain insights into the usability, acceptability and improvement areas of the app intervention. In addition, analyzed data will inform engagement strategies and implementation frameworks. This protocol provides a structured approach to evaluate usability, acceptability, and engagement of a digital mental health intervention. Incorporating the perspectives and feedback of the target population in the development of the intervention is essential to ensuring that digital mental health interventions are culturally relevant, user-friendly, and effective, thereby enhancing their adoption and success.

Concurrent validity between self-reported walking frequency and duration and wrist accelerometry data in older adults with obesity

Edelys Crespo Oliva^{1,2}, Virginia Castillo Antúnez^{1,2}, Olga Fernández Barceló^{1,2}, Juan Carlos Benavente-Marín^{1,2}, Napoleón Pérez-Farinós^{1,2}, Julia Wärnberg^{1,2}

¹ Biomedical Research Institute of Málaga (IBIMA Plataforma Bionand), Spain

² School of Health Sciences, University of Málaga, Spain

Introduction and objectives. Self-reported physical activity questionnaires are a cost-effective method to assess walking habits. However, the validity of these questionnaires compared to data obtained using accelerometers in real-life conditions remains debated. This study aimed to evaluate the concurrent validity between a question on walking and strolling frequency and duration and the walking time measured by accelerometers in real-life surroundings in older adults with obesity.

Methods. A total of 299 men and women, aged 55 to 70 years, volunteered to participate in the study. Over an eight-year period, they self-reported their walking habits in annual interviews and wore a GENEActiv accelerometer on their non-dominant wrist for 4 to 7 days on 850 occasions. Concurrent validity was assessed using Spearman's correlation coefficient (ρ) and Bland–Altman plots.

Results and discussion. A significant correlation was found between self-reported total walking and strolling time and accelerometer-measured walking time ($\rho = 0.479$; $P < 0.001$). However, self-reports overestimated walking time by 25 minutes, and the Bland–Altman plot showed a proportional bias, with greater disagreement at higher values.

Conclusions. These results suggest that in older adults, walking habits should preferably be assessed using accelerometers rather than relying exclusively on self-reported measures.

A personalized intervention to prevent depression at the workplace based on risk predictive algorithms and decision support systems: protocol of the e-predict D-WORK study

Cristina González-Monroy^{1,2}, Santiago Galán-Ortega³, Sara Reyes-Martín^{1,2}, Sonia Conejo-Cerón^{1,3}, Patricia Moreno-Peral^{2,3}, Henar Campos-Paño^{1,2,3}, Carmen Garrido-González^{1,2}, Alberto Rodríguez-Morejón^{2,3}, Emiliano Rodríguez-Sánchez^{3,4}, María Isabel Ballesta^{3,5}, Antonina Rodríguez-Bayón^{3,5}, Juan Manuel Mendive⁶, Olaya Tamayo-Morales^{3,4,7}, Ana Clavería^{3,8}, Alfonso Leiva^{3,9}, Yolanda López-Del-Hoyo^{3,10}, Jesús Lanero-Sáenz^{3,10}, Macarena Chacón-Docampo^{3,8}, Francisca Muñoz-Cobos⁵, Juan Ángel Bellón^{1,2,3,5}

¹ Biomedical Research Institute of Málaga and Nanomedicine Platform (IBIMA-BIONAND), Spain

² University of Málaga, Spain

³ Chronicity, Primary Care and Health Promotion Research Network (RICAPPS), ISCIII, Spain

⁴ Institute of Biomedical Research of Salamanca (IBSAL), Spain

⁵ Andalusian Health Service (SAS), Spain

⁶ Institut Català de la Salut (ICS), Barcelona, Spain

⁷ University Alfonso X el Sabio, Spain

⁸ SERGAS – Galicia Sur Health Research Institute, Spain

⁹ Health Research Institute of the Balearic Islands (IdISBa), Spain

¹⁰ University of Zaragoza, Spain

Introduction: Depression is the leading cause of sick leave and productivity loss in developed countries. However, little is known about the effectiveness of psychological and educational interventions for workplace depression prevention. Most interventions are not tailored to individual risk levels. The e-predictD-WORK study aims to design, develop, and evaluate a self-guided m-health intervention based on a predictive risk algorithm, decision support systems (DSSs), and personalized prevention plans (PPPs).

Methods: A randomized, double-blind, controlled trial with two parallel arms (e-predictD-WORK vs. active m-Health control) and a 12-month follow-up will be conducted. Participants will be Spanish employees aged 18-65 years, free of depression. The intervention will include nine modules: physical exercise, social relationships, problem-solving, communication skills, assertiveness, decision-making, sleep improvement, thought management, and coping with work stress. The intervention will be tailored according to individual depression risk levels, calculated using the predictD risk algorithm. The primary outcome will be the cumulative incidence of depressive disorders. Secondary outcomes will include depressive and anxiety symptoms, probability of depression risk, and improvements in physical and mental quality of life. Cost-effectiveness and cost-utility analyses will be conducted.

Expected Results and Conclusions: To our knowledge, e-predictD-WORK will be the first study to assess the effectiveness and cost-effectiveness of a personalized online intervention based on a predictive risk algorithm for workplace depression prevention. If this intervention were effective and cost-effective, even with a small effect, its impact would still be relevant due to its potential scalability.

An online transdiagnostic and personalised intervention for prevention of anxiety and depression over risk assessment in Spain and Chile: protocol of the PANDORA randomized controlled trial

Biomedical Research Institute of Málaga and Nanomedicine Platform (IBIMA-BIONAND),

Sara Reyes Martín^{1,2}, Carmen Garrido González^{1,2}, Sonia Conejo Cerón^{1,3}, Santiago Galán Ortega³, María Rodríguez Ayllón³, Cristina González Monroy^{1,2}, Edelys Crespo Oliva^{1,2}, Abel Gómez Díaz¹, Henar Campos Paíno^{1,2}, Patricia Moreno Peral^{2,3}, Emiliano Rodríguez Sánchez^{3,4}, Alberto Rodríguez Morejón^{2,3}, Sandra Saldivia Bórquez⁵, Alexis Vielma Aguilera^{5,11}, Mariela Gatica Saavedra⁵, Kristin Schmidt⁵, María Isabel Ballesta Rodríguez^{3,5}, Antonina Rodríguez Bayón^{3,5}, Juan Manuel Mendive Arbeloa⁶, Lennert Goossens^{1,2}, María Teresa Rodríguez Palacios^{1,2}, Juan Ángel Bellón Saameño^{1,2,3,5}

¹ Biomedical Research Institute of Málaga and Nanomedicine Platform (IBIMA-BIONAND), Spain

² University of Málaga, Spain

³ Chronicity, Primary Care and Health Promotion Research Network (RICAPPS), ISCIII, Spain

⁴ Institute of Biomedical Research of Salamanca (IBSAL), Spain

⁵ Universidad de Concepción, Chile

⁶ Institut Català de la Salut (ICS), Barcelona, Spain

¹¹ Universidad San Sebastián, Chile

Introduction: Depression and anxiety are highly correlated. Transdiagnostic treatments, whose target is the psychopathological mechanisms that both diagnoses share, have proven effective. However, very few trials have proposed transdiagnostic interventions for their prevention. The objective of this project is to design, develop, and evaluate a self-guided, internet and mobile-based intervention for the personalized prevention of anxiety and depression, from a transdiagnostic and biopsychosocial perspective and based on risk algorithms.

Methods: A total of 2,595 depression -and/or anxiety-free participants, aged 18-65 from Spain and Chile, will be recruited and randomly assigned to one of two intervention groups or the usual-care group. Pandora-1 includes four interactive modules (i.e., physical activity, sleep, social interactions, and emotional well-being). It includes predictive risk algorithms for the onset of episodes of depression and anxiety, decision support systems, monitoring, feedback, and personalization. Pandora-2 is a psycho-educative intervention

with predictive risk algorithms, minimally interactive. The main outcome will be a combined assessment of anxiety and depression through the CIDI diagnostic interview at six and 12 months follow-up. Secondary outcomes and mediators will be completed at baseline, one, six, and 12 months. We expect that the Pandora intervention will reduce the new onset of anxiety and depression episodes.

Conclusions: This study will provide new and relevant information about the effectiveness of two versions of the Pandora App. If proven effective, the Pandora App may significantly impact the improvement of the population's mental, physical, and psycho-social health due to its potential scalability through digital technologies.

BePresent universal online parenting intervention: Assessing parents intervention satisfaction

Malin Kinnunen¹, André Sourander¹, Terja Ristkari¹, Kaisa Mishina¹

¹ Research Centre for Child Psychiatry, University of Turku, Finland

Introduction: Online parenting programs have great potential to promote positive parent-child relationships as and engage parents. The aim is to present with intervention components parents found helpful and their satisfaction rate the in the universal online BePresent parenting intervention for families with three-year-old children.

Methods: We conducted a single-arm pre-post intervention study. Parents attending their child's three-year health check-up were recruited from children's primary health clinics. The intervention was an unguided online parenting program consisting of five modules. Self-reported satisfaction measures were collected at eight-week follow-up. The questionnaire included 10 items used to rate how well participants felt the intervention components provided support in specific areas of parenting.

Results: Altogether, 752 parents registered, and 515 started the intervention. Of those, 36% (n=183) completed the intervention. Parents reported high satisfaction with the intervention: the majority (68.8–84.9%) were satisfied with various aspects of the program, and 89.9% said the intervention provided information about positive parenting skills. Over 80% of all the parents indicated that they would recommend the program to others and agreed that the program provided information about positive parenting skills as well as ways to notice the good in their child. Satisfaction was significantly higher among those who completed the program.

Conclusions: It seems that the users are satisfied with the BePresent universal parenting intervention and it gives them confidence in their parenting capabilities. Thus, considering the limited resources in society, online parenting interventions may offer a wise way of supporting parenting.

Co-Creation in Digital Health: Developing a Mobile App for Monitoring Depression During Pregnancy

Marta Jackowska¹, Katarzyna Żukowska¹, Valentina Simonetti², Sandra Nakić Radoš³, Maria Bulgheroni²

¹ SWPS University, Poland

² Ab.Acus srl, Italy

³ Catholic University of Croatia, Croatia

Introduction: There is a gap in the literature relating practical guidance for the development of mobile apps for pregnant women with depression. This study objective was to use a co-creation approach by incorporating various stakeholders to develop such an app.

Method: Stakeholders included: peripartum women, peripartum mental health researchers, patients' representatives, healthcare professionals, developers and designers. All stakeholders, except for the women, met regularly to share intermediate results and provide continuous feedback on the app. This led to conceptualization of the app and description of its users, who were pregnant women with depression and healthcare professionals following the woman throughout pregnancy. Surveys in healthcare professionals (N = 14) and peripartum women (N = 24) were carried out to gain insight into the initial system that came out from the co-creation process.

Results: We developed a system described as a mobile app that supports women's mental well-being during pregnancy and collects data that are made available to a healthcare professional following the woman throughout pregnancy. Women and healthcare professionals thought the application was useful, but healthcare staff raised concerns about the risk of distress if women had access to their own data on mental health. Security, confidentiality of data and lack of motivation to use the app were mutually suggested barriers.

Conclusion: This study provides guidance for the development of a mobile app for mental well-being during pregnancy. Involving multiple stakeholders and gathering feedback from both women and healthcare professionals informed about the needs and preferences of the app's potential users.

Smartphone Application Development Framework for Psychological Skills Training

Sally Reynard¹, Chris McAdam², Adam Dehaty², Mary Quinton¹

¹ University of Birmingham, United Kingdom

² Get Ahead Mindset, United Kingdom

Introduction: Psychological skills training (PST)—using mental techniques to nurture psychological skills in athletes—enhances performance, motivation and wellbeing. These benefits translate to settings outside of sport through the facilitation of positive exercise behaviour, which is known to improve individuals’ mental health. However, access to PST is typically limited to elite athletes. Digital technologies, such as smartphone apps, can constitute accessible, acceptable, feasible and effective intervention modalities for mental health and related psychological skill development. However, PST app development guidelines do not exist, and there are concerns around the quality and evaluation of extant PST-based apps. Therefore, there is a need for PST app development guidelines.

Methods: Informed by the Medical Research Council’s (MRC) Complex Intervention Development Guidelines, best practice insights were collated into a framework through the integration of relevant guidelines, theories, approaches and working practices. The framework was created to be accessible and widely applicable to ensure the benefit of academic researchers and non-academic collaborators across different disciplines related to PST, mental health and digital technology.

Results: The best practice framework comprises four key components: 1) application of the MRC’s Complex Intervention Development Guidelines, 2) interdisciplinary collaboration, 3) gamification integration and Self Determination Theory (SDT), and 4) human-centred co-design. Components are discussed sequentially with reflections and examples from real-world application.

Conclusions: Novel PST smartphone applications can be leveraged to promote mental wellbeing, along with optimal public health outcomes and reduced burden on public services. The creation of accessible app development guidelines is essential to facilitate the field’s progression.

Procrastination or Progress? A Randomized Controlled Pilot Study Comparing the Acceptance and Adherence of the Internet-Based Intervention "StudiCareProcrastination" as a Blended versus Stand-Alone Version for College Students

Anna Pyttlik¹, Ann-Marie Kuchler², Leandra Bantleon², Harald Baumeister², Fanny Kahlke³

¹ Technische Universität München, Germany

² Universität Ulm, Germany

³ Technische Hochschule Deggendorf, Germany

(Academic) Procrastination is widespread, with prevalence rates of up to 95%, and contributes to stress and life impairments. The research project “StudiCare Procrastination” aims to reduce procrastination among students. The internet- and mobile-based cognitive behavioral therapy (iCBT) has demonstrated its feasibility and potential effectiveness in a previous study. However, it also showed a typically high drop-out rate (64%) and low adherence (34% - 36%). Thus, interventions need to be developed that target procrastination while promoting adherence. In a pilot study, as part of the joint project “StudiCare”, we compare a blended intervention, offering iCBT embedded in group counseling in a face-to-face format (iCBT-blended) with iCBT as a stand-alone self-help intervention.

Students with high procrastination (Irrational Procrastination Scale (IPS) ≥ 32 , target N=74) are randomized to either the iCBT-blended or the iCBT-alone intervention. In the sense of realistic support, a third group includes low-procrastination students accessing the iCBT-alone intervention. All participants will be assessed at baseline and 6-weeks post-randomization. Primary outcome measures are acceptance and adherence. Secondary outcome measures include effectiveness, participant expectations, and mental health measures. Recruitment at the Technical University of Munich has been ongoing since November 2024. Current enrollment is at N=42, with an expected end in July 2025. Primary outcomes will be analyzed with t-tests, and secondary outcomes with linear regression models.

Optimizing “StudiCare Procrastination” into the iCBT-blended intervention should support students’ adherence and acceptance. If these measures increase in the iCBT-blended compared to the iCBT-alone intervention, the iCBT-blended version can be recommended for routine care.

Study protocol: My Symptoms Young – a new internet-based programme for young people with persistent physical symptoms in primary care. Exploration of effect and health literacy characteristics among users

Nina Maindal¹, Marianne Rosendal², Anna Aaby³, Tim Olde Hartman⁴, Charlotte Ulrikka Rask¹

¹ Aarhus University Hospital Psychiatry, Denmark

² Aarhus University Hospital, Denmark

³ Aarhus University, Denmark

⁴ Radboud University Medical Center Nijmegen, The Netherlands

Introduction: Young people with persistent physical symptoms (PPS), such as pain and fatigue, not explained by well-defined disease, are common across healthcare settings. These symptoms may lead to school absence, social withdrawal, high healthcare utilization, and risk of chronicity. The eHealth programme My Symptoms Young is an early self-help intervention developed for young people with PPS in primary care. Health literacy (HL) and eHealth literacy (eHL) of the young people - their ability to access, obtain and understand health information - will be essential for active engagement with and benefit from My Symptoms Young.

Methods: This open pilot study will test the preliminary effects of My Symptoms Young in young people aged 15-25 years with PPS. We will include 62 participants, who will receive questionnaires at baseline, post treatment and at a 3-month follow-up. Primary outcomes are symptom intensity and symptom interference with daily activities. Secondary outcomes include physical symptom burden, psycho-behavioural features, health-related quality of life and patient satisfaction with the programme. HL and eHL measures at baseline will be explored as potential moderators of effect.

Results: Data collection is ongoing. At the conference, we will present core intervention elements and study procedure.

Conclusion: Early intervention of PPS is essential to prevent worsening. This project will provide initial insights into the effects of My Symptoms Young and the potential impact of HL and eHL on outcomes. Findings will be crucial for the further implementation of My Symptoms Young in primary care where evidence-based treatment options remain limited.

Optimizing Community Mental Health Teams (CMHTs) Implementation: Key Factors to Consider in Central and Eastern Europe

Ines Camino¹

¹ Utrecht University / Trimbos Institute, The Netherlands

Background: Severe mental illness (SMI), including psychotic and major depressive disorders, poses a significant global public health challenge, especially in Central and Eastern Europe, where care remains largely institutionalized. This study, part of the RECOVER-E project, aims to understand the contextual factors influencing the implementation of Community Mental Health Teams (CMHTs) in five Central and Eastern European countries: Bulgaria, Croatia, North Macedonia, Montenegro, and Romania.

Methods: Using the Consolidated Framework for Implementation Research (CFIR), a pragmatic formative evaluation was conducted through focus groups, interviews, and observations at each site to identify barriers and facilitators to implementation.

Results: Key barriers included intersectoral fragmentation, inadequate financing, high staff turnover, unclear role definitions, hierarchical structures, and stigma towards peer workers and individuals with SMI. Facilitators included prior experience with community mental health initiatives, broad stakeholder support, and positive attitudes towards home visits.

Conclusion: The study highlights the importance of addressing barriers and enhancing facilitators across multiple CFIR domains to develop effective implementation strategies for CMHTs. It emphasizes the need for integrating health and social care services, defining clear roles, and launching anti-stigma campaigns. These findings underscore the importance of pre-implementation context analysis which could eventually aid to tailor interventions effectively and enhance their sustainability.

Integrating digital mental health services into a comprehensive model of mental healthcare delivery

Nele A. J. De Witte¹, **Eva Van Assche**¹, **Tom Van Daele**¹

¹ Thomas More University of Applied Sciences, Belgium

Introduction: Digital services for prevention, diagnostics, and intervention in mental healthcare have been around for over two decades. They support patients as self-help, guided self-help and blended interventions and rely on a variety of technologies such as smartphones, wearables, and virtual reality. Where digital mental health might have been

considered a niche in the past, integration in existing care pathways and process models is increasingly explored. Such integration nevertheless requires novel model of service delivery which can be used as a starting point to instruct (aspiring) professionals, as well as thoughtful implementation.

Methods: A comprehensive model for mental healthcare delivery in which digital mental health is integrated was developed as part of curriculum reforms of a bachelor in Applied Psychology. This model was constructed evidence-based (relying on existing reference works from handbooks and research) as well as practice-based (relying on experiences of leading health institutes and own experiences within the domain).

Results: The resulting model starts from a request for help or problem statement and includes informal care, (diagnostic) assessment, and intervention offers. It informs on delivery formats (from face-to-face to fully online), assessment of necessary skills, and (digital) modality selection. This model was subsequently used as a framework for a course on Digital Psychology.

Conclusions: The position and potential of digital mental health in mental healthcare can be unclear for (new) professionals in the field. This model illustrates how digital health can be implemented in mental healthcare, offering an overarching approach for training and implementation of these services.

Bridging the Gap for Patients Waiting for Psychotherapy: Focus Groups for the Agile Development of the QUATEMAR App with Tele-Coaching

Jennifer K. Kulke¹, Kiona Weisel¹, Paula Gebauer¹, Seyma Gedik¹, Jasmin Hmaid¹, Matthias Berking¹

¹ Friedrich-Alexander University Erlangen–Nürnberg, Germany

Introduction: Digital interventions hold great potential to support individuals in need, yet their effectiveness often remains limited potentially due to insufficient user adaptation. The QUATEMAR app with tele-coaching aims to help users find a psychotherapist and bridge waiting times. To enhance its usability and effectiveness, the present study applied an agile development approach.

Methods: Three focus groups were conducted, consisting of digital mental health researchers (n=5), psychology undergraduate students (n=3), and psychological burdened individuals (n=2). The goal was to iteratively improve the functionality and usability of the intervention, as well as identifying potential barriers and facilitators. Data analysis followed a combined inductive and deductive approach via the method of central discussion aspects by Ruddat (2012). During each focus group, two independent note-takers documented participants' responses. Each note-taker coded their own transcript

twice before coding the transcript of the other note-taker to minimize subjective influence on category formation. Finally, codings were compared, and main categories were defined.

Results: Across the three focus groups, 14 main categories were identified. The most significant themes included the importance of motivation and encouragement from tele-coaches, the personalization of content, and overcoming technical and psychological barriers. Major barriers included mental disorder severity, low motivation, and lack of time. Based on these findings, the app was specifically optimized, and a tele-coaching guide was developed to effectively support users during their waiting time for psychotherapy.

Conclusions: The study highlights the relevance of using focus groups to optimize and tailor interventions to specific target groups and enhance their effectiveness.

Feasibility, acceptability and effectiveness of smartphone-based virtual reality relaxation for a psychiatric population: an explorative pilot study

Sylvie Bernaerts¹, Filip Bouckaert², Glen Debard¹, Siska Desplenter², Johanna Kindermans², Jasmien Obbels², Romy Sels¹, Tom Van Daele¹, Marlon van Loo¹, Bert Bonroy¹

¹ Thomas More University of Applied Sciences, Belgium

² University Psychiatric Centre KU Leuven, Belgium

Introduction: Barriers such as cost limit the adoption of virtual reality (VR) in practice. We therefore aimed to investigate the feasibility, acceptability and effectiveness of smartphone-based VR relaxation.

Methods: We used a mixed-methods design, testing an intervention over an 8-week period in 29 psychiatric patients (16F, 13M, mean age=64) in a closed psychiatric ward. The intervention comprised one 15-minute smartphone VR relaxation session in which the user was immersed in a computer-generated natural environment (i.e., beach, mountain landscape, snowy scenery) without or with audio guidance (progressive muscle relaxation, mindfulness). Through observations and an online survey, we investigated the feasibility and acceptance of using smartphone VR as a relaxation tool. Via The Affective Slider (in the smartphone VR app), we assessed the level of relaxation before and after the intervention.

Results: Participants were neutral (15/29) to (very) positive (13/29) towards VR (1/29 negative). 19/29 participants wanted to re-use the app and advised others to use it. Reluctance to do so was due to the ease of use, physical discomfort or disbelief in its usability. No significant differences in the levels of happiness or arousal (Affective Slider) were found after VR use. Participants particularly liked the auditory guidance and music, and the result of feeling relaxed, whereas a need for more practice and a stronger implementation plan were considered as points of improvement.

Conclusions: Patients were more positive toward the tool than clinical staff. Smartphone VR relaxation is feasible and acceptable for psychiatric patients, although its effectiveness and implementation need further investigation.

Effectiveness of a Multimodal Online Psychotherapy Approach for Armenian Patients Abroad: Integrating CBT, Gestalt, Humanistic-Existential Therapy, and Brainspotting

Madlena Arakelyan¹

¹ Yerevan State Medical University after Mkhitar Heratsi, Republic of Armenia

Introduction: This study investigates the effectiveness of internet-based psychotherapy for Armenian patients living in the US, Europe, and Russia. Utilizing CBT as the foundational framework, the study integrates additional therapeutic methods such as humanistic-existential psychotherapy, Gestalt therapy, and Brainspotting. Patients were referred to the therapist through acquaintances in Armenia. The author, working both online and offline, combined different therapeutic methods to assess the efficacy of a holistic approach for online therapy.

Method: The study involved 30 participants who engaged in an eclectic online therapeutic approach over one year, with therapy durations ranging from three to six months. The structured foundation of CBT provided consistency, while the incorporation of humanistic-existential therapy, Gestalt therapy, and Brainspotting facilitated deeper emotional processing, targeting emotional dysregulation and unresolved emotional traumas.

Results: The findings indicate significant improvements in patients' mental health across multiple dimensions, including reductions in anxiety, depression, and emotional dysregulation. Brainspotting, in particular, facilitated deeper emotional processing, while humanistic-existential and Gestalt elements contributed to greater self-acceptance, emotional expression and enhanced coping mechanisms. The structured nature of CBT provided patients with a sense of stability and clarity throughout the therapeutic process.

Conclusion: The eclectic therapeutic approach, with CBT as its core framework, proves to be highly effective for online therapy. The combination of structured cognitive techniques, depth-oriented emotional processing, and somatic integration fosters a comprehensive online psychotherapy model. These findings suggest that a multimodal online therapy approach can effectively address the complex mental health needs of the patients.

Assessing Baseline Characteristics for the PrevANS Anxiety Prevention Trial in Portugal and Spain

Filipa Salomé¹, Cristina García-Huércano², Patricia Moreno-Peral³, Sonia Conejo-Cerón², Inês Rothes¹, Margarida Rangel-Henriques¹

¹ Center for Psychology, Faculty of Psychology and Education Sciences, University of Porto, Portugal

² Biomedical Research Institute of Málaga (IBIMA Plataforma Bionand), Spain

³ Faculty of Psychology, University of Málaga, Spain

Anxiety disorders represent a major global health burden, worsened by COVID-19. Epidemiologic studies in Portugal and Spain showed that anxiety disorders are among the most prevalent mental health problems. Even with improved healthcare access, evidence shows that treatment alone may be insufficient to reduce the rising number of cases, emphasizing the need for effective preventive strategies. To our knowledge, no online personalized intervention for anxiety prevention in adults has been validated in Portugal and Spain. To address this, prevANS was designed as an innovative intervention to reduce anxiety disorders incidence in the general adult population, through an app or web. The program is personalized using the risk algorithm predictA, which was developed to predict the onset of anxiety disorders in the next 12 months and was validated in Europe. The prevANS project aims to develop, implement and evaluate this evidence-based intervention in Spain and Portugal, through a randomised controlled trial. This study includes 1000 participants per country, without anxiety disorders at the baseline, following an intervention group vs. control group across three assessment periods (baseline, 6-month and 12-month follow-up). This poster presents baseline findings from ongoing recruitment, analysing sociodemographic, psychosocial (e.g., perceived social support, satisfaction with the cohabitation) and clinical characteristics (e.g., anxious and depressive symptoms, risk of anxiety disorder onset) of individuals interested in an online prevention tool. We will explore associations between baseline characteristics and compare findings between countries. This may offer insights into the generalizability of the intervention and potential impact on intervention outcomes.

Evaluating the efficacy of different cognitive-behavioral therapy protocols for procrastination in an online group setting: a randomized controlled trial

Marek Wypych¹, Weronika Maria Browarczyk², Joachim Kowalski³, Magdalena Pietruch¹, Jarosław M. Michałowski²

¹ Nencki Institute of Experimental Biology, Poland

² SWPS University, Poland

³ Institute of Psychology, Polish Academy of Sciences, Poland

Introduction. Procrastination involves voluntarily delaying intended tasks despite knowing this may lead to adverse outcomes. Cognitive-behavioral therapy (CBT) is widely recognized as an effective intervention for reducing procrastination, however, the efficacy of different CBT protocols remains underexplored, requiring robust comparative studies.

Methods. This study compared two CBT protocols for procrastination with active and waitlist control groups. A total of 222 high-procrastinating students were recruited. The 5-week interventions were delivered online by pairs of trained therapists in a 5-7 subjects group setting. The active conditions included identical psychoeducation and cognitive strategies but differed in behavioral modules. The first protocol focused on realistic planning and timely beginning (RPT), while the second on working time restriction (WTR). The active control condition behavioral module utilized the Pomodoro Technique (PT).

Results. Results from intention-to-treat analyses using linear mixed models revealed significant reductions in procrastination across all active interventions compared to the waitlist with large effect sizes. At the same time, however, a substantial number of non-responders were identified. No significant differences were observed among the active interventions and follow-up assessments six months post-intervention confirmed the stability of treatment effects for procrastination.

Conclusion. This is the first study directly comparing the efficacy of distinct CBT protocols for procrastination and showing their high efficacy in online group settings. At the same time a substantial number of non-responders indicates a need for studies testing whether different therapeutic protocols may be more or less effective for different subgroups of subjects and moving us towards personalized selection of treatments.

The Importance of Narcissism and Parental Mediation on Problematic Adolescents' Self-Disclosure on SNS

Kristina Žardeckaitė-Matulaitienė¹, Ugnė Paluckaitė¹, Viktorija Čepukienė¹

¹ Vytautas Magnus University, Lithuania

Photo self-disclosure has become one of the main activities among adolescents on social networking sites (SNS). Today, it is well established that adolescents spend a significant amount of time on SNS, where they share various types of age-restricted content, including photos depicting forbidden behaviors (e.g., photos of smoking or drinking, nudes). However, it remains unclear how adolescents' problematic photo self-disclosure on SNS is related to narcissism and parental mediation.

This study aims to examine the relationship between narcissism, parental mediation (both active and restrictive), and adolescents' problematic photo self-disclosure on SNS. To achieve this, a quantitative study was conducted (N = 598; M age = 15.35, SD age = 0.48; 62.5% female). Adolescents completed online questionnaires assessing their problematic photo disclosure on SNS and other psychosocial factors, including narcissism and parental mediation.

The results of a two-step hierarchical regression analysis indicate that both narcissism and active parental mediation increase adolescents' likelihood of engaging in problematic photo self-disclosure on SNS ($F = 5.40, p < .05$). This suggests that adolescents with higher levels of narcissism and those experiencing active parental regulation of social media use are more likely to engage in problematic photo self-disclosure on SNS.

These findings highlight the importance of considering narcissism and parental mediation when designing and implementing prevention or intervention programs aimed at reducing adolescents' problematic self-disclosure on SNS.

This research has received funding from the Research Council of Lithuania (LMTLT), agreement No S-MIP-23-16.

Digitally-assisted intervention with online coaching for the Early Childhood Educator teams: a randomized controlled trial

Katja Toivonen^{1,2}, Laura Kortesoja^{1,2}, Susanna Hinkka-Yli-Salomäki^{1,2}, André Sourander^{1,2,3}

¹ Research Centre for Child Psychiatry, Department of Clinical Medicine, University of Turku, Finland

² INVEST Research Flagship Centre, University of Turku, Finland

³ Department of Child Psychiatry, University of Turku and Turku University Hospital, Finland

Aim: An ongoing randomized controlled trial (RCT) Power of Growth (FinnPoG), aims to investigate: 1) changes in early childhood educators' (ECEs) self-assessed self-efficacy in the intervention group compared to the control group; 2) changes in behavioral challenges of the children in the ECEs' groups, as assessed by parents, in the intervention group compared to the control group; and 3) changes in ECEs' guidance methods in the intervention group compared to the control group. Additionally, we will investigate changes in ECEs' well-being and teamwork in both groups.

Intervention: The intervention consists of digital self-learning material and online team coaching. The self-learning materials include 360-degree videos of everyday daycare situations, viewed using VR glasses. Participants systematically practice positive guidance and interaction skills with their group of children. The intervention lasts approximately 12 weeks.

Method: The RCT covers the entire region of Southwest Finland and parts of Western Finland. Eligible teams are randomly assigned to either the Power of Growth intervention group (n=32) or the control group (n=32). The control group does not receive any intervention during the research phase. Each team consists of 2-5 professionals.

Results: The intervention has been successfully piloted, and participant recruitment for the RCT is ongoing.

Conclusion: This study provides insights into the efficacy and usability of the Power of Growth intervention. A digital platform and online coaching may help standardize practices for preventing and managing behavioral challenges in child groups.

