

**Results:** 213 mothers with children aged one year to 17 years responded. 157 mothers (73.7%) were in employment (104 were working in an office, 32 were working from home and 18 were freelancing). 121 mothers had >one child. Majority of the mothers (n=170, 79.81%), believed that children should have <one hour screen-time. However, they also admitted that majority of their children spent >one hour per day screen-time. The usage was more during weekends (>one hour=161, 75.58%) than weekdays (>one hour = 145, 68%)(p=0.021). Weekend screen-time was more in children whose mothers were employed (p=0.006). There is a significant increase in weekday (p=0.044) and weekend (p=0.006) screen-time usage as the child's age increased. Children predominantly watched television, followed by mobile phones and tablets. Except for 29 children, the rest enjoyed interacting with other people (54 with everyone, 73 with only family members and 57 only for some time). The primary context in which children engaged with electronic devices was while they were being fed/ meals-time (n = 114,54%) or when the mothers were busy with household chores (n = 85,40%).

**Conclusions:** Despite maternal awareness about healthy screen-time, majority of the children were allowed to use higher screen-time. Efficient strategies should be imparted to parents to change the current practices of using digital-media as pacifier or distractor to mindful screen-time including usage for educational purposes.

**Disclosure of Interest:** H. Atturu Consultant of: Advisor to CognitiveBotics, AI based software., S. Gujju: None Declared

## EPP0638

### The relationship between children's rumination and parental rumination, worry and depressive symptoms

J. Szóke<sup>1,2\*</sup>, M. Klein<sup>1,2</sup>, Á. Örkényi<sup>1</sup> and G. Kökönyei<sup>1,3</sup>

<sup>1</sup>Institute of Psychology, ELTE Eötvös Loránd University; <sup>2</sup>Doctoral School of Psychology, ELTE Eötvös Loránd University and <sup>3</sup>NAP3.0-SE Neuropsychopharmacology Research Group, Hungarian Brain Research Program, Semmelweis University, Budapest, Hungary

\*Corresponding author.

doi: 10.1192/j.eurpsy.2024.739

**Introduction:** Rumination is a transdiagnostic phenomenon that is linked to psychological and physical symptoms not only in adulthood but also in childhood. Several distal and proximal factors are believed to underlie the development of ruminative tendencies, with parental characteristics and modelling being among those with a potential association with the increased levels of children's rumination.

**Objectives:** The primary aim of the study was to investigate the link between rumination in children and parental functioning, including rumination, worry and depressive symptoms. Additionally, we aimed to test the association between rumination and psychological and somatic health in a sample of healthy children and early adolescents.

**Methods:** 153 children (87 girls, mean age = 10.74; SD = 0.91 years) and their parents (130 females, mean age = 42.65; SD = 4.08 years) participated in the study. For children, Kid Rumination Interview (KRI; Baiocco et al., 2017) was used, alongside the assessment of nine subjective health complaints. KRI employs 4 images to

measure the frequency of rumination. Self-reported questionnaires were also completed by parents to report on worry, rumination, and depressive symptoms.

**Results:** Contrary to our expectations, there was no significant association between children's rumination and parental rumination (r = .06, p = .506), worry (r = -.02, p = .850) and depressive symptoms (r = -.01, p = .979). Psychosomatic complaints in children exhibited a positive albeit weak association with parental depressive symptoms (r = .17, p = .046). Regression analysis revealed that the frequency of rumination occurring in the four situations associated significantly with psychosomatic symptoms ( $\beta = .266$ ; t = 3.321; p = .001) after controlling for sex and age.

**Conclusions:** Our findings are in line with previous studies demonstrating the relationship between rumination and psychosomatic symptoms in older adolescent samples. However, parental perseverative cognitions and depression were unrelated to ruminative tendencies in children. Nevertheless, the modest sample size and the employment of a different assessment approach compared to self-report questionnaires may have influenced our findings.

**Disclosure of Interest:** None Declared

## EPP0640

### Long-term prognosis of chronic depression in adolescence

V. Kaleda<sup>1\*</sup> and V. Migalina<sup>1</sup>

<sup>1</sup>Mental Health Research Centre, Moscow, Russian Federation

\*Corresponding author.

doi: 10.1192/j.eurpsy.2024.740

**Introduction:** juvenile chronic depression is characterized by high prevalence, difficulties in diagnosis, nosological qualification and prognostic assessment. According to epidemiological data, the frequency of these conditions ranges from 1.5% to 3% in the general population (Gutiérrez-Rojas et al. Braz. J. Psychiatr 2020; 42 657-672), and among all depressions in adolescence, a chronic course develops in about 20% of cases (Blanco C., 2010 et al. The J clinical psychiatry 2010; 71(12) 6501). Due to the polymorphism of the clinical picture and the peculiarities of juvenile ontogenesis, difficulties arise in nosological and prognostic assessment.

**Objectives:** to study the long-term prognosis of chronic depression, depending on the variant of its course.

**Methods:** Catamnestic examination was performed on 64 patients of adolescent age (16-25 years), for chronic depressive state lasting more than two years (F31.3, F31.4, F32 (except F32.3), F33 (except F33.3), F34, F34.1, F21, F20 according to ICD-10). The duration of the catamnesis is more than 10 years. The PSP scale was used for psychometric assessment.

**Results:** when analyzing the ten-year course of juvenile chronic depression, three variants were identified: regredient (23.4%), monotonous (35.9%) and progredient (40.6%). The regredient course was characterized by a marked reduction or disappearance of psychopathological disorders with the formation of further remission with a high level of functioning in all spheres of life and complete social and labor adaptation (81-100 points on the PSP scale). The monotonous course was characterized by low variability

and insignificant dynamics of individual manifestations throughout the disease with the preservation or some decrease in the level of educational and labor adaptation with the restoration of previous social contacts and a fairly high quality of life (scores 61-80 on the PSP scale). The progressive course was characterized by the gradual addition of new psychopathological disorders, or the aggravation of existing ones, patients had a distinct decrease in educational, labor and social adaptation (scores 50-31 on the PSP scale) or complete maladaptation of all spheres of life (scores <40 on the PSP scale).

**Conclusions:** The high incidence of progressive and monotonous course in juvenile chronic depression, contributing to a decrease in the level of functioning of patients, indicates the importance of timely detection of these conditions and the need for careful selection of therapy.

**Disclosure of Interest:** None Declared

### EPP0641

#### Predictors of change in emotional regulation from 6 to 30 months of age in infants born after a threatened preterm labour.

J. Andreu<sup>1\*</sup>, J. Buesa<sup>1</sup>, L. Campos<sup>1</sup>, B. Almansa<sup>2</sup>, C. Zapata<sup>3</sup>, M. Lizarán<sup>2</sup>, N. Gómez<sup>2</sup>, F. Ghosn<sup>2</sup>, A. Moreno<sup>2</sup> and A. García-Blanco<sup>3</sup>

<sup>1</sup>Psychiatry, Hospital Universitario y Politécnico La Fe de Valencia; <sup>2</sup>Psychology, La Fe Research Institute and <sup>3</sup>Psychology, Hospital Universitario y Politécnico La Fe de Valencia, Valencia, Spain

\*Corresponding author.

doi: 10.1192/j.eurpsy.2024.741

**Introduction:** Emotional dysregulation are considered early manifestations of neuropsychiatric disorders. Recent research has shown that a threatened preterm labour (TPL) represents an adverse prenatal event that involves temperament disturbances, even in absence of prematurity. Thus, full-term TPL infants at 6 months of age are characterized by lower positive affect, higher negative affect, and worse emotional regulation relative to a full-term non-TPL control group.

**Objectives:** The aim of this study is to explore the predictors of change of emotional infant competences.

**Methods:** This prospective cohort study recruited mothers who suffered from a TPL. Infants' temperament assessment was performed at 6 and 30 months of age using the Rothbart Behaviour Questionnaires, examining positive affectivity/surgency, negative emotionality, and orienting and emotional regulatory capacity. A regression model was carried out, including gestational age at birth, maternal anxiety trait, maternal history of psychological traumas, prenatal and postnatal maternal depression, anxiety, and cortisol as well as parenting stress as predictors.

**Results:** Increased positive affectivity was related with lower paternal stress ( $p = .044$ ). Maternal history of trauma and parenting stress was associated with increased negative emotionality ( $p = .037$  and  $p = .045$ , respectively). Increased emotional regulation disturbance was linked to low gestational age at birth ( $p < .001$ ), higher postnatal depression ( $p = .002$ ), higher prenatal anxiety at TPL diagnosis ( $p = .039$ ) and higher postnatal anxiety ( $p = .008$ ).

**Conclusions:** Therefore, maternal previous traumas, maternal psychopathology from pregnancy to postpartum as well as parenting

stress should be considered in psychological treatment to improve infant's emotional competences and prevent subsequent neuro-psychiatric disorders.

**Disclosure of Interest:** None Declared

### EPP0642

#### The Friendship Gap: Investigating gender differences in adolescent friendships and mental health

T. Manchanda<sup>1\*</sup>, A. Stein<sup>1</sup> and M. Fazel<sup>1</sup>

<sup>1</sup>Psychiatry, University of Oxford, Oxford, United Kingdom

\*Corresponding author.

doi: 10.1192/j.eurpsy.2024.742

**Introduction:** Friendships are vital relationships throughout the lifespan, but become especially meaningful during adolescence. Adolescents between the ages of 10 and 18 name a friend as one of the most important people in their lives (Kiesner et al., 2004). Authentic social groups, defined as mutual social relationships that adolescents voluntarily engage in, are sources of support and companionship for adolescents, more than parents (Furman & Buhrmester, 1992). Past research shows adolescents turn to their friends most for mental health support in a crisis, yet less than half report finding the support helpful (Geulayov et al., 2022). Thus, it's crucial to understand friendship dynamics of adolescents in order to address an appropriate intervention. Past literature has demonstrated gender differences in how adolescents approach friendships and social relationships (Lempers & Clark- Lempers, 1993).

**Objectives:** I aim to investigate whether girls, boys, and gender non-binary individuals differ in their perceptions of friendship quality and friendship dynamics (i.e. social support seeking) and whether these differences have implications for their mental health outcomes. By studying gender differences in friendship quality and mental health, I hope to shed light on potential avenues for promoting inclusivity and positive mental health outcomes for both gender binary and gender non-binary adolescents.

**Methods:** A cross-sectional survey (OxWell) was administered online to students across secondary schools and further education colleges in England to assess their self-reported friendship quality. The RCADS and WEMWBS scales were used to assess depression and anxiety symptomology, and well-being, respectively. The results from the survey were analysed in R.

**Results:** Gender-binary and gender non-binary adolescents differed in friendship quality, friendship dynamics, mental health scores, and help-seeking behaviours. Gender non-binary adolescents had the worst mental health scores and reported lowest friendship quality compared to girls and boys. Boys had the best mental health when compared to girls and gender non-binary adolescents, and were more likely to perceive support provided by their friends as helpful. Surprisingly, gender non-binary adolescents reached out to their friends the most (when compared to girls and boys) for mental health support, despite having proportionally lower quality friendships, and were the least likely to find support received from friends helpful.

**Conclusions:** This data presents evidence for the difference in social relationships across adolescents of all genders. It highlights the need for specialized and inclusive mental health support being made available for gender non-binary youth in England—a