

Results: The intervention group included 213 and the control group 212 patients, with the sample's mean age being 59.41 (SD=10.70). Those who used the system had statistically significant lower depressive symptoms at 12 weeks (mean difference=-3.05, $p=0.004$; 95%CI -5.12 to -0.99) compared to controls, with a clinically relevant effect size (Cohen's $d=0.41$). Notable significant reductions included suicide ideation (mean difference =-0.61, $p=0.020$; 95%CI -1.13 to -0.10) and incidence of depressive symptoms at week 12 (OR=0.43, $p=0.019$; 95%CI 0.22 to 0.87). The improvements in depressive symptoms were sustained at week 24 (mean difference =-1.34, $p=0.015$; 95%CI -2.41 to -0.26). No significant differences were observed for other secondary outcomes.

Conclusions: The NEVERMIND system was shown to be superior to standard care in reducing and preventing depressive symptoms among the studied sample.

Disclosure of Interest: None Declared

EPP0694

A mixed-methods investigation into impact of motivation type on adherence and effect in iCBT for binge eating disorder

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doi: 10.1192/j.eurpsy.2023.989

Introduction: Motivation is an important factor in therapy and potentially even more so in an online setting. Earlier research shows that more autonomously motivated patients have better outcomes and completion rates than more controlled motivated patients'. However, little is known about how motivation type influences treatment effect in an online setting and in patients with binge eating disorder specifically.

Objectives: This study set out to investigate how motivation type as per the Self-Determination Theory would affect treatment adherence and effect in a sample of 148 patients, undergoing an Internet-based Cognitive Behavioral Therapy (iCBT) for BED.

Methods: The study was mixed-methods. A sample of 148 patients gave two written qualitative statements regarding their motivation for seeking treatment and reasons for choosing online therapy. The statements were transformed into quantitative units via the condensation method. The themes were categorized according to the model by Ryan and Deci based on level of autonomy and perceived locus of causality.

This was compared with completion rate and outcomes on eating disorder symptomatology. Completion was designated into three groups. Low adherers - less than six sessions ($n=54$), high adherers - between 7 and 10 sessions ($n=56$) and full adherers - 10 session plus follow up ($n=37$).

The effect of the treatment was measured via the Eating Disorder Examination Questionnaire (EDEQ) and Binge Eating Disorder Questionnaire (BEDQ).

Results:

Table 1 shows the distribution of patients' motivational types regarding therapy aims

Controlled	Autonomous				
	Introjection	Introjection	Identification	Integration	
Motivational type:					
Patient motivation:	Shame	Weight loss	Psychological stress	Insight	In all
In all	25	25	50	48	148

Table 2 shows the distribution of patients' motivational types regarding online treatment

Controlled	Autonomous				
	Introjection	Introjection	Identification	Integration	
Motivational type:					
Patient motivation:	External	Avoidance	Convenience	Reflection	In All
In all	31	21	81	15	148

Table 3 shows the results from motivational types in each setting on BEDQ and EDEQ scores. No significant correlation was found.

Therapy Aims	BEDQ	0.92
	EDEQ	0.51
Why Online Therapy	BEDQ	0.99
	EDEQ	0.23

Conclusions: Perceived locus of causality and level of autonomy, did not affect level of adherence or outcome of treatment in either setting. This unexpected result may suggest that internet-based therapy is less dependent on motivation types, when comparing with face-to-face treatment.

Disclosure of Interest: None Declared

EPP0695

Young Vs Adults: Adaptability to ICTs, resilience, anxiety and depression in university students and professors

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doi: 10.1192/j.eurpsy.2023.990

Introduction: Personal access to digital technologies proved to be an important measure to curb the desertion of students at a public university in the Colombian Caribbean during the COVID-19 pandemic; however, there are no studies that explore the relationship between the use of new information and communication technologies, resilience, anxiety and depression during physical