

Significant results were then analyzed using a multiple linear regression analysis with PSQI-K as the dependent variable to assess the impact of clinical variables on sleep quality.

Results: PSQI-K was positively correlated with SAS ($r = 0.457$, $p < 0.001$), K-HDRS ($r = 0.447$, $p < 0.001$), and negatively correlated with MDPSS ($r = -0.336$, $p < 0.05$). Smartphone use, depressive symptoms, and perceived social support seemed to explain 35.7% of sleep quality. After adjusting for confounders, more smartphone use and more severe depressive symptoms were associated with poor sleep quality (SAS: $\beta = 0.383$, $p = 0.002$; K-HDRS: $\beta = 0.339$, $p = 0.006$), but perceived social support did not reach statistical significance (MDPSS: $\beta = -0.204$, $p = 0.086$).

Conclusions: The results of this study show that the more a person uses a smartphone, the worse their sleep is. This effect is significant, even when other factors are taken into account. These results support the possibility that improving the degree of smartphone use could be an essential intervention target for improving sleep quality during the inter-episode period in patients with bipolar disorder.

Disclosure of Interest: None Declared

Child and Adolescent Psychiatry 02

EPP0137

Symptoms of depression and anxiety in adolescents and their caregivers: A cross-sectional study from North Macedonia

I. Kunovski^{1*}, F. Bolinski², M. Raleva¹, R. Isjanovska³, G. Kalpak¹, A. Novotni¹, B. Stefanovski¹, K. Hadzihamza¹ and S. Bajraktarov¹

¹University Clinic of Psychiatry, Medical Faculty, Ss. Cyril and Methodius University, Skopje, North Macedonia; ²Netherlands Institute for Mental Health and Addiction - Trimbos Institute, Utrecht, Netherlands and ³Institute for Epidemiology and Biostatistics with Medical Informatics, Skopje, North Macedonia

*Corresponding author.

doi: 10.1192/j.eurpsy.2023.473

Introduction: Mental health problems have increased internationally during the COVID-19 pandemic. However, most data stems from Western countries and there is a clear lack of prevalence rates and potential risk factors from Central and Eastern Europe.

Objectives: To investigate the point prevalence and to provide further information on risk factors of depressive and anxiety symptoms in adolescents and their caregivers in North Macedonia after the COVID-19 pandemic.

Methods: A cross-sectional survey study was conducted on adolescents and their caregivers through the school setting in different areas of North Macedonia. Survey items assessed symptoms of depression, anxiety, and respondents' fear of COVID-19, as well as a number of risk factors, such as gender and living environment.

Results: 506 adolescents and 492 caregivers completed the survey. Symptoms of depression and anxiety were mild to moderate in adolescents and their caregivers. Women and girls generally scored higher than men and boys, and adolescents in high school scored higher than those in elementary school. Prevalence rates for depression were 29.2% for adolescents and 10.4% for caregivers, while rates of anxiety were 23.7% for adolescents and 6.1% for caregivers.

Conclusions: This study provides a first insight into the mental health of adolescents and their caregivers after the COVID-19 pandemic in North Macedonia. Further research is required to investigate the relatively low reported rates of caregivers' mental health problems compared to data from other countries.

Disclosure of Interest: None Declared

EPP0138

'Positive results of an intensive, immersive, confrontational and protocolized 10-week residential program for youth with mental health problems.'

J. Vangeneugden

Yes We Can Clinics, Hilvarenbeek, Netherlands

doi: 10.1192/j.eurpsy.2023.474

Introduction: Treating mental health problems adequately is of paramount importance given the tremendous burden it places on the individual and on society. Knowing and realizing there is no one size-fits-all-solution, some methods do yield better results. The yardstick as such can be interpreted with scores on questionnaires, subjective accounts and/or having the need for further future follow-up treatments.

Objectives: Within the Yes We Can Clinics, based in the Netherlands, we provide a very intensive 10-week residential treatment program where clients learn to acknowledge their problems and get to the root of these problems. The program is centered around confrontation in group sessions from counselors and peers, a well-thought out activity program from early morning till late evening, multiple psychotherapeutic sessions on a daily basis and if possible, minimize the use of medication.

Methods: Different Routine Outcome Measurement tests were applied.

Results: Here we measured willingness to participate in the program, which fluctuates from average to low at the start, reaching a significant low motivational point after 2/3 weeks, in accordance with the quintessential confrontational aspect, but following the principles of the program in combination with reconnecting with parents and family (systems-approach), a tremendous increase in willingness and commitment towards the program, but also towards life and facing mental health struggles in general, arises.

Conclusions: Herewith confirming the effectiveness of our intensive, immersive, confrontational and protocolized 10-week residential program for youth with mental health problems

Disclosure of Interest: None Declared

EPP0140

Psychometric Properties of the Parent Versions of the Japanese Versions of the Strength and Difficulties Questionnaire: A study on Health Checkups for 5-Year-Old Children in Japan

K. Yokoyama* and K. Nomura

Nagoya University, Nagoya, Japan

*Corresponding author.

doi: 10.1192/j.eurpsy.2023.475