Aims: The DIALOG scale has been implemented as a routine patient outcome and experience measure (PROM/PREM) in East London Foundation Trust (EL FT). We used large routinely collected DIALOG data to assess impact of treatment across different domains of life and whether the impact of treatment changed with Community Mental Health Transformation CMH (NHS Long Term Plan). We also carried out secondary disaggregation analysis of pooled data based on protected characteristics interrogating through an equity lens.

Methods: EL FT had commissioned University of Plymouth for the review of CMH transformation. Anonymised pooled data set was obtained from the electronic patient records that were collected as a part of routine clinical practice. DIALOG (PROM and PREM) scores captured routinely from CMH services in ELFT over two time periods (2018–19 and 2021–22) were collected for this purpose.

The anonymised and pooled data was linked with stages of treatment e.g. assessment, review and at discharge and protected characteristics (age, gender, ethnicity and a proxy of social deprivation).

14,813 DIALOG scores from 6,538 unique patients were identified. We analysed each domain of DIALOG separately and the numbers of return of scores on each domain varied depending on response rate. We compared domain based descriptive statistical analyses of mean pooled DIALOG scores looking at means across a range of variables for each domain and then conducted a series of multiple regressions for each of the DIALOG domains, to control for multiple variables together

Results: Our results showed that service user satisfaction in each domain improved with treatment stage (from assessment to review to discharge) reaching statistical significance at each stage. There were minor differences between the two time periods (2018–19 and 2021–22) in a few domains. There was variation in outcomes across ethnicity, age and gender in a few domains.

Conclusion: Large data sets of routinely collected DIALOG data offer valuable insight into the needs of the local population and impact of treatment. Assessment of the impact of the CMH service transformation was confounded by the pandemic. Disaggregated data on protected characteristics reveal interesting and useful information about experiences and outcomes of different population groups over time. Our study also validates DIALOG as a quality of life measure and patient experience measure scale that is sensitive to measure change. It affirms the value and depth that intelligence routine outcome data gathering can offer both to measure change as well as offering an assessment of population need.

Electrophysiological Changes in Depressive Patients with Non-Suicidal Self-Injury: An Event-Related Potential Study and Source Analysis

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Aims: Non-suicidal self-injury (NSSI) has been increasingly observed among adolescents as a maladaptive coping mechanism to alleviate emotional distress. Despite its high prevalence, the neurobiological underpinnings linking interpersonal distress to cognitive control deficits remain underexplored. Electroencephalography (EEG) studies suggest that the no-go P3 component may serve as a biomarker for impulsivity and response inhibition, offering insights into the mechanisms underlying NSSI behaviours. This study aimed to investigate the relationship between psychological characteristics, neural activity, and cognitive control in adolescents with NSSI compared with healthy controls (HC).

Methods: A total of 51 adolescents with NSSI and 50 HC were recruited. Psychological characteristics were assessed using standardized scales, including the Interpersonal Needs Questionnaire (INQ) and Short UPPS-P Impulsivity Scale (SUPPS-P). EEG was recorded during a go/no-go task to measure P3 amplitudes. Source analysis was performed to localize neural activity. Group differences were analyzed using ANCOVA to control depression and anxiety, followed by partial correlation and mediation analyses to evaluate relationships among variables.

Results: The NSSI group exhibited significantly lower no-go P3 amplitudes at all electrodes compared with the HC group ($p<0.001$), even after controlling for depression and anxiety. No-go P3 amplitudes were negatively correlated with INQ scores, suggesting that interpersonal distress impacts response inhibition. Source analysis revealed reduced neural activity in the right superior frontal gyrus, inferior parietal gyrus, and other regions associated with cognitive control and emotional regulation in the NSSI group. However, these differences disappeared after adjusting for depression and anxiety, indicating their potential mediating role.

Conclusion: These findings highlight the interplay between interpersonal distress, depression, anxiety, and cognitive control deficits in adolescents with NSSI. Future longitudinal studies are needed to confirm these pathways and explore therapeutic interventions targeting interpersonal distress and emotional regulation to mitigate NSSI behaviours.

Factors Influencing Dropout and Retention Among Autistic Students in Universities: A Meta-Synthesis of Qualitative Studies Involving Autistic Individuals

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Aims: Approximately 2% of students in higher education are diagnosed with autism, a figure likely underreported due to non-disclosure and diagnostic challenges. Autistic students in higher education face unique challenges that impact their academic persistence and success. These students experience higher dropout rates compared with their neurotypical peers. Identifying the factors leading to high dropout rates is essential for developing interventions that promote a more supportive academic environment for autistic students.

This review systematically investigates and analyses the factors that influence dropout rates among autistic students in higher education, focusing on firsthand accounts of autistic students. It draws on qualitative and mixed-method studies to address the question: What are the key factors influencing dropout rates among autistic university students across various degree programmes and institutions worldwide? The aim is to identify insights that can

inform interventions to improve educational outcomes for autistic adults.

Methods: This meta-synthesis, adhering to PRISMA guidelines, utilised the PICOS framework for a systematic review conducted in July 2024. Searches across Scopus, PsychINFO, Medline via OVID, and ERIC yielded 2,303 initial articles. Thirteen studies were selected based on relevance and peer review, involving 521 participants aged 18–54, primarily diagnosed with autism spectrum disorder and based in the UK, USA, and Australia. All participants had either considered dropping out, actually dropped out, or deferred a year. These studies examined dropout rates and potential contributory factors, with findings appraised for quality using the CASP checklist and determined to be of moderate to good quality.

Results: Analysis of the thirteen studies found significant challenges faced by autistic students in higher education, revealing an overarching theme of 'Environmental Discord' – systemic mismatches between educational structures and autistic students' needs that exacerbate academic and mental health challenges. Mental health emerged as a critical factor influencing dropout rates with exacerbated conditions such as higher burnouts, anxiety and depression due to academic pressures and social isolation. Additionally, the studies highlighted academic challenges that hinder effective learning and engagement. The analysis also identified gaps in support strategies, indicating that existing services often fail to meet the specific needs of autistic students, necessitating tailored interventions.

Conclusion: This review proposes proactive restructuring of educational environments to better accommodate diverse student needs, enhance success and reduce dropout rates. Further, the review calls for future research to develop and evaluate personalised interventions aimed at the specific challenges faced by autistic students.

Effectiveness of Behavioural Modification Techniques in Children Having Intellectual Disability Pre and Post Evaluation

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Aims: To find out the effectiveness of different strategies of behaviour modification techniques on children having intellectual disability in specific time period under controlled setting and compare pre and post scores.

Methods: 36 children diagnosed with intellectual disability were included in current studies, comprised of 20 boys and 16 girls. A diagnostic criterion of DSM–V for intellectual disability was applied to diagnose the children. Portage Guide to Early Education (PGEE) was selected to then find out the developmental age of children and in some of the cases to find out the functional level of intellectually impaired children. For diagnostic point of view intelligence test including Slosson Intelligence test was administered for screening children and Coloured Progressive Matrices was used to find out the level of mental maturity. Behaviour modification techniques that were selected for administration of IEPs in specific areas were reinforcement techniques, shaping, chaining, prompt-fading and negative punishment. The training programme consists of five days per week and four hours per day by the help of team of trained professionals; specifically all were trained clinical psychologists.

Results: Repeated measure t-test has shown significant statistical difference between pre and post ratings of the Intellectually Disabled children on all the domains including Self Help, motor, cognitive, language and socialization of PGEE, results shows the difference respectively; $t(35)=-8.82, -8.393, -7.496. -7.541$ and -7.4295, p=0.000 two tailed on above mentioned domains. Intellectually disabled children scored higher in post ratings (M=52.25, SD=15.39); (M=54.58, SD=12.46); (M=37.25, SD=18.13); (M=43.44, SD=19.00); (M=52.56, SD=17.33) on Self Help, motor, cognitive. Language and socialization domains of PGEE then pre test rating (M=44.67, SD=16.44); (M=44.78, SD=13.52); (M=29.53, SD=18.13); (M=36.47, SD=19.74); (M=43.75, SD=16.83).

Conclusion: IEPs do work effectively in dealing with children having special needs with use of behavioural intervention as it was found in our research with drastic change in post rating of each adaptive area like self-help, motor, cognitive, language and socialization.

Association Between Chronotypes and Addiction Among Adults – A Systematic Review

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Aims: Chronotype refers to the distribution of an individual's diurnal preference, ranging from morning type (MT) to intermediate or neither type (NT) to evening type (ET). Chronotype manifests in various physiological functions and influences numerous physical and psychological activities. Addiction is one of the most prevalent mental health issues, with individual studies indicating that ETs are at a greater risk of developing addiction. Given the nonexistence of a systematic review addressing this topic, this study aimed to synthesize results that explored the relationship between chronotype and addictive disorders to define the at-risk population.

Methods: A search strategy was developed using the keywords 'chronotype', 'circadian preference', 'diurnal preference', 'morningness', 'eveningness', 'circadian rhythms', and 'chronobiology'. And 'addiction', 'dependence', 'problematic use' and 'abuse'. After registering the protocol with PROSPERO, a data extraction form was developed based on the strict inclusion and exclusion criteria for the selection of studies. Selected articles were screened and the data were extracted. The results of the 16 selected studies were synthesised.

Results: ET had a significant association with substance addiction in four out of six studies and all ten studies of behavioural addiction. One study showed no association with chronotype and one showed a significant association with MT.

Conclusion: ET has a higher risk of developing an addiction. Designing and conducting longitudinal cohort studies would be beneficial in delineating the bidirectional relationship and establishing causality if present. This would also pave the way for developing chronotherapies for addiction.