with CO. There were no other significant group differences. In SZ, pronoun use was correlated with positive symptoms (especially with ratings of hallucinations, bizarre behavior, delusions of mind-reading and thought broadcasting) and inversely correlated with negative symptoms (avolition, apathy and motor retardation). Social words were inversely correlated with SAPS Thought Disorder. Clout was inversely correlated with SANS Alogia and SAPS Thought Disorder. Authenticity was correlated with SANS Anhedonia and Asociality. In CO, loneliness was correlated with the % negative emotion words and NART was correlated with total number of emotion words.

Discussion: We used an automated linguistic analysis tool to extract information relevant to social communication from written narratives. We found group differences in the use of pronouns and authenticity. We also observed associations of clinical symptoms with certain social aspects of language use in schizophrenia. One advantage of automated text analysis tools is the minimization of implicit biases inherent in ratings of interviews. Limitations of this study include lack of direct social functioning measures and the sample size. Future work will incorporate linguistic text analysis within a social paradigm to directly examine the role of language use in social functioning.

**M229. EXPERIMENTAL TRUST AND REAL LIFE SOCIAL INTERACTIONS: CLOSENESS OF THE CONTACT AND EMPATHIC SKILLS MAKE THE DIFFERENCE**

Imke Lemmers-Jansen*, Mandy Wisman-Van der Teen², Lisa Krijnen¹, Margreet Oorschot¹, Lydia Krabbendam¹, Vrije Universiteit Amsterdam; ²Vrije Universiteit Amsterdam and Yulius; ³Yulius/Maastricht University

Background: Psychosis is associated with profound problems in interpersonal functioning. One of the key elements of social relationships is trust. Previous research has shown that patients with psychotic disorders display reduced trust in others. Reduced trust may lead to paranoid ideation and (as a consequence) to social withdrawal. Patients with psychotic disorders have fewer social contacts and less social support than comparison groups and they frequently have difficulties in developing and maintaining social relationships. This has also been found in young people with first episode psychosis (FEP), who report having less close friends. However, social functioning and social support are a strong predictor for future outcome: Social networks buffer against the impact of adversities. Social isolation, in turn, is associated with reduced quality of life, increased mortality and poor patient outcomes. Therefore, investigating trust and responses to social interactions in daily life is essential for developing interventions to improve social functioning in the field of schizophrenia research. This study investigated the underlying mechanisms of reduced trust in early psychosis patients by linking experimental trust data with emotional responses to day to day social interactions by means of experience sampling. We hypothesized that early psychosis patients, similar to chronic patients with schizophrenia, show more social withdrawal, and report higher levels of negative affect and lower positive affects when in company of others than healthy controls. Furthermore, social contact in general was associated with more positive affect and lower positive affects when in company of others than healthy controls. We expect that these social aspects are associated with reduced trust.

Methods: The sample consisted of 28 patients, of which 16 FEP and 12 patients at clinical high-risk, and 28 healthy controls. Participants performed a trust game during fMRI, and filled in a questionnaire about their social activities and their emotions and symptoms during these activities, 10 times a day, during a week.

Results: Patients had less social contact, and less contact with familiar others than healthy controls. Furthermore, social contact in general was associated with more positive affect. Contact with familiar others was associated with lower positive symptoms in the patient group, and with more positive affect and less negative affect in patients, whereas patients showed higher negative affect when being alone compared to controls. Empathy was a moderator between closeness of contact and mental health. Group differences in baseline trust, with patients showing reduced baseline trust,
were not moderated by social withdrawal (the amount of social contact). Nor was baseline trust moderated by negative or positive affect when in company of others.

Social contact was not significantly associated with neural activation. However, in the caudate and the temporo-parietal junction a decrease in activation was apparent, if participants showed more social withdrawal.

Discussion: The results indicate that familiar company is related to better outcomes in psychotic disorders. Subjects with low levels of empathy had more negative affect when in company of close others when compared to being in company of less familiar others. Furthermore, associations of daily social interactions with baseline trust and its neural correlates show link between reduced baseline trust and frequently being alone. Being alone affects neural responses to received trust in patients. Future research should investigate the role of perceived social support, and the motivation to engage in social contact with good friends or family. Treatment involving familiar contacts may be effective in patients with psychotic symptoms to facilitate social contact and strengthen their relationships.

M230. VIRTUAL REALITY FOR IMPROVING SOCIAL ACTIVITIES AND PARTICIPATION (VR-SOAP): DEVELOPMENT OF A NEW TREATMENT FOR YOUNG PEOPLE WITH PSYCHOSIS

Dauw Muijsson1, Elise van der Stouwe1, Kirstin Greaves-Lord2, Saskia Nijman3, Marieke Pijnenborg4, Wim Velting5

1University Medical Center Groningen; 2Jozx, Erasmus Medisch Centrum, University Medical Center Groningen; 3University Medical Center Groningen/GGZ Drenthe; 4University of Groningen/GGZ Drenthe

Background: Young people with a psychotic disorder have the same social goals as their healthy peers, but their social networks are smaller, they participate less often in leisure activities and are less successful in work and education. Current treatments have only moderate effects on social functioning. Virtual Reality (VR) has a great potential to improve the social functioning of young people with psychosis. With VR, individuals can practice with simulations of difficult social situations in a safe and personalized way. Therefore, we aimed to develop and investigate feasibility of a novel VR treatment (VR-SOAP) for improving social contacts, leisure activities and social participation of young people with a psychotic disorder.

Methods: As a first step, a literature search of causes of impaired social functioning was conducted. Underlying relationships and mechanisms of the causes were identified. The causes of impaired social functioning were translated into concepts for the VR modules. The concepts were translated into requirements for the VR modules. Subsequently, the software and the treatment manual were developed in an iterative process with a team of experiential experts, psychosis therapists, researchers, VR experts and software engineers. The final prototype will be tested in a small pilot study with three therapists and six patients. In order to determine the feasibility and acceptability of the treatment and to evaluate and improve the treatment protocol using input from therapists and patients.

Results: Several determinants of impaired social functioning were identified: negative symptoms, impaired social cognition, paranoid ideations, social anxiety, low self-esteem, self-stigma and poor communication skills. These causes are multifaceted, but at the same time interrelated and overlapping. VR-SOAP was designed as five modules that address these causes, four optional modules (1-4) and one fixed module (5). The treatment is personalized and takes the specific individual contributing causes into account. Patient and therapist select two out of four optional modules. In module 1 (Negative symptoms) patients will focus on increasing their motivation and pleasure in dealing with amotivation and anhedonia. In module 2 (Social cognition) patients will practice with recognizing facial emotions and interpreting social situations. Module 3 (Paranoid ideations) consists of exposure exercises and behavioural experiments testing harm expectancies. In module 4 (Self-esteem and self-stigma) patients will focus on positive aspects of the self and challenge self-criticism. All patients will end with module 5 (Communication and Interaction skills), in which experiences, knowledge and skills from other modules are integrated and applied in role-plays. Currently, the pilot feasibility study is ongoing. Preliminary results will be presented.

Discussion: VR-SOAP is a promising new intervention for enhancing the social functioning of young adults with psychosis. VR is very useful for practising new social behaviour. It enables patients to practice with real-world social situations in a safe and gradual way. In the coming years, a single-blind randomized controlled trial will be conducted to test the effect of VR-SOAP on social contacts, leisure activities and social participation.

M231. INTERNALIZED STIGMA AS A PREDICTOR OF EMPLOYMENT STATUS IN PATIENTS WITH SCHIZOPHRENIA

Min Yi Sun1, Sherry Kit Wa Chan1, Samson Tse1, John R Bola2, Roger Man Kin Ng3, Christy Lai Ming Hui4, Edwin Ho Ming Lee5, Wing Chung Chang6, Eric Yu Hai Chen7

1The University of Hong Kong; 2City University of Hong Kong; 3Kowloon Hospital

Background: Employment is an important social determinant of health, especially for individuals with mental illnesses where it was found that gainful employment is crucial for both functional and clinical recovery. However, individuals with mental illnesses face significantly higher levels of unemployment compared to their counterparts without. Within different diagnoses of mental illnesses, it was found that patients with schizophrenia face higher levels of unemployment compared to patients with other diagnoses. Numerous qualitative studies have identified an association between internalized stigma and unemployment in individuals with schizophrenia, however, fewer quantitative studies have examined the specific relationship between the two factors. Therefore, we aim to elucidate the relationship between employment status and internalized stigma, and more specifically, its domains in patients with schizophrenia.

Methods: One hundred and seventy-nine patients with schizophrenia were included in this study. Illness severity was assessed using the Clinical Global Impression scale, internalized stigma was measured using the Internalized Stigma of Mental Illness scale (ISMI), and demographic information including employment status was collected. For the purpose of analysis, employment status was categorised into two groups, with the employed group consisting of those under full-time and part-time employment, as well as full-time students. While the unemployed group consisted of individuals who were unemployed at the time of assessment. The ISMI assesses five domains of internalized stigma, which are alienation, stereotype endorsement, discrimination experience, social withdrawal and stigma resistance. Multiple logistic regression, controlling for demographic and clinical factors, was conducted to identify the domains of internalized stigma associated with predictors of employment status.

Results: One hundred and two participants were employed and seventy-seven were unemployed. The employed group was younger, had shorter duration of illness, more years of education and less severe illness level (all p < .001). The unemployed group consisted of more females and divorced individuals (all p < .05). The unemployed group reported significantly higher levels of internalized stigma in the total score, as well as stereotype endorsement, discrimination experience, and social withdrawal domains (all p < .05). Mean total ISMI scores for employed and unemployed groups were 62.15 (SD = 13.69) and 67.52 (SD = 13.94) respectively. Multiple logistic regression analysis, controlling for demographic and clinical factors, found that years of education (OR = 0.835, p < .05), and two domains of the internalised stigma scale, stereotype endorsement (OR = 1.210, p < .05) and stigma resistance (OR = 0.854, p < .05), were associated with employment status.