empathy, their impact on clinical outcomes remains uncertain, highlighting the need for evidence-based implementation.
AI can immediately enhance efficiency in routine clinical tasks. Automation optimizes billing processes and reduces clerical burdens, allowing clinicians to focus more on patient care. In clinical documentation, AI-powered transcription and natural language processing (NLP) help generate structured medical records. AI also supports medical education by offering adaptive learning, personalized training, and real-time feedback through large-scale data analysis.
Beyond administrative support, AI plays a role in patient monitoring and early intervention. AI algorithms analyze speech, facial expressions, and behavioral data from smartphones and wearables, detecting mood fluctuations and early psychiatric symptoms. This real-time analysis can facilitate timely interventions and improve overall mental health care. Additionally, AI-powered chatbots and virtual therapists are increasingly used in digital mental health services, providing immediate, text-based psychological support. However, rigorous studies are needed to assess their effectiveness in improving clinical outcomes. A well-established framework for technology evaluation in mental health highlights five key areas for development: equity, privacy, evidence, clinical engagement, and interoperability. Addressing these factors is crucial to ensuring AI-driven solutions are accessible, secure, scientifically validated, clinically integrated, and capable of working across diverse health systems. By prioritizing these advancements, AI can move from theoretical promise to practical application, meaningfully improving mental health care delivery.

Disclosure of Interest: None Declared

CBS021

AI solutions for adolescent psychiatry

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doi: 10.1192/j.eurpsy.2025.240

Abstract: There is a potential for new technologies in mental health and psychiatry. Artificial intelligence enables the design models that categorize different groups and predict different prognosis trajectories.
Natural language processing enables to use classical text data from electronic health records, for instance, to detect suicide trends and their risk factors (Bey et al., 2024). This opens new perspectives in the analysis of large Electronic Health Records databases.
Artificial intelligence can extract and combine new features, like posture, physiological signal of stress and facial expression. This could be particularly important to bypass insight development in children of adolescents (Bourvis et al., 2021) while taking the opportunity of early management. This could help to optimize exposure therapy (Mahmoudi-Nejad et al., 2024), detect tantrums in non-verbal children (Cano et al., 2024) or even improve motivation for physical activity (Nuss et al., 2020).
In motion assessment, we could detect motor assessment difficulties in children with autism from typical counterparts (Gargot et al., 2022). We can also automatically detect writing difficulties (Agarwal et al, 2023).
However, AI struggles with an interpretability problem (black box). Their model are complex, the features extracted are not always obvious (Minh et al, 2021 ; Linardatos et al, 2020) .
Fine motor skills classic signal processing allows to tailor specific exercises to reeducate children with writing difficulties (Gargot et al., 2021).
Digital psychiatry however is impeded by poor user experience (Witteman et al., 2011), complex market models (Gollier-Briant et al., 2024).

Disclosure of Interest: None Declared

CBS022

AI for psychiatric training and education

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doi: 10.1192/j.eurpsy.2025.241

Abstract: Artificial intelligence (AI) is transforming psychiatric training and education by enhancing diagnostic accuracy, improving therapeutic decision-making, and personalizing learning experiences for trainees. AI-driven simulations, virtual patients, and natural language processing (NLP)-based assessments allow for more effective skill development in psychiatric diagnosis and psychotherapy. Machine learning models provide evidence-based guidance, reinforcing clinical reasoning and treatment strategies. Ethical considerations, including patient confidentiality and bias mitigation, remain central to AI implementation in training. This session explores the latest advancements in AI-driven psychiatric education, discussing practical applications, challenges, and future directions for integrating AI into clinical training programs.
Keywords: AI, psychiatry, education, machine learning, clinical training
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Disclosure of Interest: None Declared

CBS023

Cultural competence in forensic psychiatry

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doi: 10.1192/j.eurpsy.2025.242

Abstract: In this paper several issues about cultural competence will be addressed, such as assumptions, Mason's five progressive steps and learning needs of professionals. The notion of cultural

https://doi.org/10.1192/j.eurpsy.2025.240 Published online by Cambridge University Press