

of the users and their families and it is believed this could turn out to be an important factor to be worked on within the projects of psycho-education of the mental health center.

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#### EV1189

### Psychological aspects in parents of children with disability and behavior problems

F. Ricci\*, C. Levi, E. Nardecchia, A. Antonella, P. Andrea, G. Salvatore

IRCCS San Raffaele Pisana, Pediatric Rehabilitation Center, Roma, Italy

\* Corresponding author.

*Introduction* Parents of children with disabilities are at increased risk of experiencing psychological stress compared to other parents. Children's high levels of internalizing and externalizing problems have been found to contribute to this elevated level of stress. Childhood disability often imposes a social and emotional burden for children and their families.

*Objective* With this study we evaluated several parents' psychological aspects and the emotional behavioral functioning of their children with disability.

*Aim* To investigate the possible correlation between parenting stress, level of depression in parents and behavior problems in their children, taking into account the differences between mothers and fathers.

*Method* Standardized forms (CBCL, PSI, BDI) were completed from 57 (28 mothers) parents of children aged from 6 to 18 years, focusing on psychological well-being includes depression, parenting stress, family resilience and family adjustment.

*Results* The mean age of our sample was  $41.55 \pm 5.4$ . The level of depression and stress index were higher in mothers than in fathers. Parenting stress was significantly associated with children internalizing and externalizing behavior problems in children.

*Conclusion* The results of this investigation indicate the importance of examining relations between parenting stress and behavior problems in children with disabilities. Objective of ensuring the rehabilitation process aimed at the welfare of the family. These patterns have implications for both developmental theory and for service provision for individuals with disability and their families.

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#### EV1190

### Predictors of social function and quality of life in patients with traumatic brain injury

S. Ubukata\*, G. Sugihara, T. Murai, K. Ueda

Kyoto University, Department of Psychiatry- Graduate School of Medicine, Kyoto, Japan

\* Corresponding author.

Cognitive deficits as well as affective and physical symptoms are common after traumatic brain injury (TBI). However, little is known about how these deficits affect functional outcomes. The purpose of this study was to investigate the relationship between neuropsychological, affective and physical sequelae and outcomes such as social function and quality of life in patients with TBI. We studied these relationships in 57 patients with TBI over the course of 6 months post-injury. The patients completed neuropsychological assessments, including the Wechsler Adult Intelligence Scale-III,

the Rivermead Behavioural Memory Test, and verbal fluency test. Affective and physical symptoms were assessed by Beck Depression Inventory-II, Chalder fatigue scale, and Pittsburgh sleep quality index. Functional outcomes were assessed using the World Health Organization (WHO) disability assessment rated by others and the WHO quality of life assessment (WHO/QOL 26). The patients showed impairments in executive function assessed by verbal fluency test. The affective and physical assessments showed mild depressive mood and fatigue problem. Multiple regression analysis revealed that executive function and depressive mood were the best predictors of social function and quality of life, respectively. The findings of this study suggest that executive function and depressive mood are important factors to predict functional outcomes in patients with TBI.

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#### EV1191

### Deinstitutionalization and psychosocial rehabilitation

C. Vidal<sup>1,\*</sup>, L. Melo Vidal<sup>2,3</sup>

<sup>1</sup> Faculdade de medicina de Barbacena, psiquiatria, Barbacena, Brazil

<sup>2</sup> Prefeitura Municipal de Barbacena, Saúde Mental, Barbacena, Brazil

<sup>3</sup> Barbacena Medicine School, student, Barbacena, Brazil

\* Corresponding author.

*Introduction* Barbacena is a Brazilian city with 140,000 inhabitants, which was known as the "city of madmen" because of the excessive number of patients in psychiatric hospitals. In 2000 it began a deinstitutionalization process, and the patients were transferred to assisted residential services.

*Objective* Describe the process of deinstitutionalization and social rehabilitation of psychiatric patients.

*Methodology* The following characteristics were studied: sex, age, medication use, psychiatric diagnosis and the development of social skills.

*Results* In each therapeutic residence (RT) lives eight patients, supervised by upper and mid-level professionals. Since the implementation of RTs about 400 patients leave the psychiatric hospitals. Most had mental retardation (51.0%), followed by schizophrenia (31.0%). More than half (58.5%) were men. The age ranged from 29 to 97 years, with an average of  $64.8 \pm 12.4$ . A decrease in the average dose of neuroleptics was seen after deinstitutionalization. Direct observation of patients in the RT, and the reporting of caregivers has shown that patients have developed wide range of social performance, such as dating, started at professional courses, attending exercise classes, travelling and learn how to use money.

*Conclusion* In despite of difficulties in the psychiatric reform process, the community-based treatment and psychosocial rehabilitation approach are the principal models of psychiatric care presently, and the residential services play an important role in this process. The authors emphasize the importance of community support, professional staff and rehabilitation programs as a condition for good outcomes.

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#### EV1192

### Review of physical health care in patients with chronic psychiatric conditions in a rehabilitation unit

A. Yetkil\*, S. Wisidagama

Surrey and Sussex NHS Healthcare trust, Psychiatry Liaison, Surrey, United Kingdom

\* Corresponding author.

**Introduction** An important aspect to consider in chronic patients on psychotropic medication is their physical health status. Along with an aging population and the side effects of the medication it is key to identify complexities of their physical health that may be troubling the patient or can potentially effect the patient.

**Objectives** Using the standards for inpatient mental health rehabilitation services highlighted by AIMS Rehab.

we will assess if the current method used to highlight any physical health concerns are being met for the new patients admitted in to the unit from January 2016 to September 2016.

**Aims** Evaluate the quality of physical healthcare in Margaret Laurie House (Surrey and Borders NHS trust Rehabilitation unit).

**Methods** We designed a spreadsheet to capture the standards as outlined in 'physical healthcare' section of the AIMS Rehab document.

We obtained the relevant patient data using the System One electronic patient record. The system contains an embedded template where physical health parameters are entered so we were able to simply copy the data from these sections. We then translated this information into an Excel spreadsheet format.

**Results** The analysis of the data remains as work in progress at the current time. We anticipate low compliance with the 8 outlined standards (9.1.1–9.2.2). These were all considered type 1 standards; according to the AIMS rehab guidance the expectation is that the service must meet 100% of these standards. Upon re-audit we aim for 100% compliance.

**Conclusion** Work in progress-to be updated.

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## e-Poster Viewing: Research Methodology

### EV1193

#### Psychometric properties of the Arabic version of adult hope scale

T. Alali

Kuwait University, psychology, Kuwait, Kuwait

**Introduction** The adult hope scale (AHS) was developed as measure of hope with a 12-item using an 8-point Likert-type scale (Snyder et al., 1991). Although there is an Arabic version of AHS, it is not identical to the original version in terms of the number of items response.

**Objectives** To evaluate the psychometric properties of the Arabic version of the AHS in undergraduate sample.

**Methods** The participants were undergraduate Kuwaitis (1000 males and 1000) females. The mean age of the males was (20.25 ± 0.05) years, and for females was (19.96 ± 1.44) with a significant age difference (t = 4.22, P < .000). The Arabic version of the AHS was administered to participants. The internal consistency reliability, factor structure, and convergent validity of the AHS with Life Orientation Test (LOT-R), oxford happiness inventory (OHI), and Satisfaction With Life Scale (SWLS), while the divergent validity of AHS were assessed with Beck Depression Inventory-II (BDI-II) and the beck anxiety inventory (BAI).

**Results** Internal consistency was satisfactory for the AHS (Cronbach's alpha = 0.83) for males and (Cronbach's alpha = 0.81) for females. The results revealed no significant gender differences on happiness (F = 1.68, P > .05). Principal component analyses (PCA) showed that a three-component solution explains %54.56 of the total variance for males and 51.99% for females. The AHS positively correlates with the following variables: SWLS (r = .43), LOT-R

(r = 0.40) OHI (r = .49) while the AHS correlates negatively with BDI-II (r = -.49) and with BAI (r = -.39).

**Conclusions** This study provides evidence for the reliability and validity of the Arabic AHS for Kuwaitis.

**Disclosure of interest** The author has not supplied his/her declaration of competing interest.

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### EV1194

#### Measuring affective attitudes towards health among adolescents

M. Iosifyan<sup>1,\*</sup>, G. Arina<sup>2</sup>, A. Korneev<sup>2</sup>, A. Ryabova<sup>2</sup>, V. Nikolaeva<sup>2</sup>

<sup>1</sup> National Research Center for Preventive Medicine, Laboratory of psychosocial factors, Moscow, Russia

<sup>2</sup> Lomonosov Moscow State University, Department of psychology, Moscow, Russia

\* Corresponding author.

**Introduction** Affective attitudes play a significant role in health behaviors. However, comparing to cognitive attitudes, affective attitudes are much less investigated.

**Objectives** To study affective attitudes towards health among adolescents, we measured associations between words related to health and positive/negative emotions.

**Aims** We used the modified Etkind Color Test (Etkind, 1980) as a new measure of affective attitudes.

**Methods** Subjects (n = 79, Mage = 14.34 ± 1.21, 35 males) ranked 8 colors from Lüscher's color test (1971) from best to least associated with each of 13 words related to health (e.g. sport, risky behaviors) and 6 words related to positive and negative emotions. To calculate an association between an emotion and a health-related word we used a scoring algorithm, similar to Palmer's and colleagues MCA score (Palmer et al., 2013).

**Results** Means of associations between words and positive emotions were assessed: my body (0.74 ± 2.02), environment (1.17 ± 1.82), eating (1.23 ± 1.98), health (1.60 ± 1.78), risky behaviors (-1.14 ± 2.14), family (2.13 ± 2.00), sport (2.02 ± 1.86), sleep (0.74 ± 1.85), school stress (-0.95 ± 1.89), hygiene (0.91 ± 1.85), medicine (0.61 ± 1.95), psychological well-being (1.11 ± 2.24), illness (-0.43 ± 1.39). Positive emotions had inverse relation with risk behaviors, illness and school stress and direct relation with the rest 10 factors.

All correlations between negative and positive attitudes towards health related words were significant and negative (-.223 < r < .559), except two (medicine and illness).

**Conclusions** The modified Etkind Color Test describes semantic space of affective attitudes towards health. It showed that adolescents mostly did not have ambivalent attitudes towards health related factors.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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### EV1195

#### Confirmatory factor analysis of the frost et al multidimensional perfectionism scale-24 (F-MPS 24)

M.J. Soares, J. Azevedo\*, A.T. Pereira, A.I. Araújo, J. Castro, B. Chaves, C. Roque, M. Bajouco, A. Macedo

Department of Psychological Medicine, Faculty of Medicine-University of Coimbra, Coimbra, Portugal

\* Corresponding author.

**Introduction** The F-Multidimensional Perfectionism Scale is a widely used instrument to assess perfectionism trait. The original scale comprises 35-items that measure the six dimensions