Introduction
Like elsewhere, studies from developing countries suggest that parents of children with attention deficit hyperactivity disorder (ADHD) report significant stress. Besides symptoms, parental stress stems from experiences in interpersonal, schooling and societal domains, which may in turn be influenced by sociocultural factors. This is a highly under-studied area.

Objectives and aims
Exploring experiences in familial, schooling and societal areas amongst Indian parents and understanding these in a cultural context using experiential qualitative research methodology.

Methods
In-depth semi-structured interviews were conducted with consenting parents of 27 children diagnosed with ADHD (17 mothers; 10 fathers).

Results
All parents reported experiencing moderate to high degree of stress, feeling worried and frustrated due to child's problems. 19 parents reported being "short-tempered", while 1 mother expressed feeling "lost". Majority reported strained relations with spouse and extended family. Mothers reported higher stress, more difficulties in family life, faced criticism from immediate family and community regarding handling of child, felt more embarrassment, guilt and sense of failure as a mother. Half of the parents avoided attending social gatherings. Other than 2 parents, all had negative experiences with schooling. Experiential descriptions included those of teachers being highly critical of child and parents, punitive, dismissive and discriminatory. Teacher had advised seeking treatment in only 6 children. Themes of blame, discrimination and rejection were identified.

Conclusions
We conclude that cultural factors such as stigma, blaming of parent (especially mother) and lack of knowledge regarding ADHD amongst teachers and society may be responsible for these experiences and needs further investigation.

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

http://dx.doi.org/10.1016/j.eurpsy.2017.02.190

EW0577
Parental causal explanations and treatment seeking in attention deficit hyperactivity disorder: Perspectives from a developing nation based on process theory
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Introduction
Cultural factors have an important role in causal model of symptoms, threshold for treatment seeking and acceptability of professional help in ADHD.

Objectives and aims
To explore causal explanations and treatment seeking amongst parents of children with ADHD and understand these in context of a largely collectivistic culture as in India.

Methods
In-depth semi-structured interviews were conducted with 27 consenting parents; data interpreted using process theory.

Results
Initial reaction to psychiatric referral revealed themes of disbelief/surprise, feeling confused/offended and lag of 6–36 months to consultation. Parents most commonly attributed causality to psychosocial reasons (lack of motivation/volitional, inadequate disciplining), while few gave one or more biomedical explanations (epilepsy, brain damage, low birth weight, nutritional deficiency, maternal ill health, low intelligence) alone or with a psychosocial reason. Despite the initial reaction, all but 1 parent was relieved with medical explanation, accepted diagnosis, and perceived need for treatment. Most parents were willing to start/continue medication if doctor suggested so as “he/she would know the best”. All parents expressed that counseling was needed.

Conclusions
Initial reactions and delay in treatment seeking is understood in light of cultural attitudes towards mental illnesses and psychiatric consultation in developing nations. More importantly, despite initial reluctance, most parents accepted biomedical explanation and treatment. The doctor patient relationship modeled on a guru-chela relation of complete trust in authority can explain this process change. We conclude that cultural attitudes not only influence causal models and initial treatment seeking, but also modify process of help seeking.

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

http://dx.doi.org/10.1016/j.eurpsy.2017.02.190

0924-9338/
Outcomes in a group of 7–8-year-old children in a developmental-based intervention in autism spectrum disorder

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Healthy parent-child interaction is essential for child development. Parents play a central role in the acquisition of social and communicative skills, both in typical and atypical children. Increased support for parent-mediated intervention in autism has been demonstrated. Developmental approaches for ASD are based in establishing strong interpersonal relationships through natural play to foster developmental capacities. This work reports outcomes from an intensive approach based on a developmental, individual difference, home-based intervention program with children with severe ASD. Parents were trained with DIR approach by a specialist. An individual intensive rehabilitation program was set up for each child and implemented at school, home and rehabilitation center. The intervention program also focused on semi-structured activities to promote problem solving, and improve sensory dysfunction. Standardized scales were administered pre- and post-intervention, with ABC. The Childhood Autism Rating Scale (CARS), the Social Communication Questionnaire (SCQ) and Vineland Adaptive Behaviour Scales.

Results

Before initiating the intervention all children presented severe difficulties in communication, social interaction, lack of language, and gestures of communication, auto- and hetero-aggressive behaviors. After 6 months, children showed significant changes in mean scores for emotional functioning, communication, and daily living skills and diminution of aggressive behaviors. The present results provide strong support for the effectiveness of a developmental-based intervention, specifically in the domains of social skills behavior, social responsiveness, in a group of children with severe autism. These results highlight the positive effects of a rehabilitative approach that works in harmony with the family, school and professional team.

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

Impulsivity and current alcohol use in adolescents

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Introduction

Many studies have focused on the strong link between impulsivity and addictive behaviors, such as alcohol use disorders.

Objective

Our study aimed to investigate the links between alcohol use and impulsivity in a sample of Tunisian pupils.

Methods

This was a cross-sectional study conducted in May and June 2016. It enrolled 317 pupils from four colleges and schools in Sfax (Tunisia). The participants were asked to answer a self-administered questionnaire, after their consent. Alcohol use disorders identification test (AUDIT) was used to evaluate alcohol dependence. The Barratt Impulsiveness Scale (BIS), in its 11th version, was used to assess impulsivity trait. Its three second-order factors were attentional impulsiveness, motor impulsiveness, and non-planning impulsiveness.

Results

The mean age was 16 years with a sex-ratio of 1.07. The school children reported having drunk alcohol at least once in 18.9% of cases and 41.66% of them still consume. According to AUDIT, 1.6% of alcohol users presented an alcohol misuse and 21.6% presented dependence. According to BIS, impulsivity prevalence (IP) in the whole sample was 27.8% while it was 40% among the alcoholic participants versus 24.9% in non-alcoholic participants. The average BIS score was more important in the alcoholic participants (69.25 versus 65.53; P = 0.011). Alcohol consumption was correlated to attentional impulsiveness (P = 0.01) and motor impulsiveness (P = 0.008). Alcohol dependence was correlated to motor impulsiveness (P = 0.018).

Conclusion

These results show the importance of clinically evaluating and intervening on impulsive personality traits to better prevent addictive behavior such as alcoholism among adolescents.

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

Music as a helpful instrument in the treatment of children with ASD in their school inclusion program

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Since birth infants are active and communicative partners engaged in protoconversations with caretakers. Motherese, the simplified language adults spontaneously use with infants, has a musical structure. We believe that for developmental and evolutionistic reasons music is a preferential tool to favor communication and to promote group identity. We carried on a musical experience with a group of autistic (ASD) children aged 5 to 7 years. Each child participated at their school with 10 typically developed classmates and their teachers. Our ASD children love music and enjoy playing and singing. With music, they overcome some communicative and social difficulties. Their bodily posture changed with music, facilitating joint attention and improvement of verbal language. When singing children learned linguistic skills, they ameliorated vowels’ pronunciation and understood how a question and an answer differ in melodic contour. Taking into account the unique sensory motor profile of each ASD child, we proposed rhythmic music with high proprioceptive input (for under-reactive children) and smooth and calming music for avoidant and easily overwhelming children in order to ameliorate intentionality and enlarge circles of communication. A combination of semistructured and spontaneous activity is the main components of our approach, which has both therapeutic and educational impacts. In the musical group, all the ASDs appeared to be more attentive, motivated, better performing and able to teach their acquired skills to their peers. Typical peers interact more with children with ASD with music. We consider this very helpful in the inclusion of ASD children in a school setting.

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

Influence of peers drinking and parental drinking and attitudes on adolescent drinking