Conclusions: Under ecologically valid conditions, we found that daily rumination was more important in daily affective experiences than trait-level rumination. Understanding whether one’s current affect is more strongly associated with trait-level, state-level or even contextual factors may yield better intervention strategies for affective disorders.

Disclosure: No significant relationships.

Keywords: rumination on positive affect; daily diary study; daily positive affect; state- and trait-level rumination

O0081

Short-term psychological support to civilians exposed to the January 2015 terrorist attacks in France

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doi: 10.1192/j.eurpsy.2022.274

Introduction: Some projects have described post-disaster psychosocial services and planning across Europe. However, little is known about the real psychosocial disaster responses such as low-intensity initiatives after a terrorist attack.

Objectives: This study aims (1) to describe psychological support (PS) in the immediate (<48 hours), post-immediate (48 hours – 1 week) periods and more than one week after a terrorist attack among terror-exposed people, and (2) to identify factors associated with a lack of short-term PS among those who suffered from mental health disorders.

Methods: This study used data from a longitudinal survey of 189 civilians exposed to the January 2015 terrorist attacks conducted 6 months after the attacks. Factors associated with lack of PS after the attacks was identified using a Robust Poisson regression in three separate models (for the 3 periods).

Results: Among participants who suffered from PTSD (n=34), depression (n=74), or anxiety (n=59) 6-9 months after the terrorist attacks, respectively, 9%, 18% and 12% did not received psychological support. The lack of immediate PS was associated with geographical distance, type of exposure, and support in daily life. The lack of post-immediate PS was associated with geographical distance, peri-traumatic reactions and past psychological follow-up. The lack of PS after one week was associated with geographical distance and social isolation.

Conclusions: Characteristics of exposition and social support seem to play an important role in lack of PS after a terrorist attack and highlights the need to use strategies to reach out to people regardless of the type of exposure.

Disclosure: No significant relationships.

Keywords: Psychological support; Epidemiology; mental health; Terrorist attack

O0082

Facilitation of Psychiatric Advance Directives by peer-workers: results from DAiP

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doi: 10.1192/j.eurpsy.2022.275

Introduction: United Nations Convention on the Rights of Persons with Disabilities recognized that people with psychosocial disabilities have the same right to take decisions and make choices as other people. Consequently, direct or supported decision-making should be the norm and there should be no substitute decision-making. However, these principles are far from common practice in many mental health services. Joint-crisis plan (JCP) and Psychiatric advance directives (PAD) are interesting tools to translate the shared-decision making principle into clinical and practical reality. Most existing JCP or PAD involve facilitators, which improves their effectiveness, but facilitators are mostly professionals.

Objectives: In this context, DAiP study was launched to evaluate the efficacy of PAD facilitated by peer-workers.

Methods: DAiP was a multicenter randomized controlled trial conducted in 7 French mental health facilities, with a complementary qualitative approach. 394 adults with a DSM-5 diagnosis of schizophrenia (SCZ), bipolar I disorder (BP-I), or schizoaffective disorders (SCZaff), who were compulsorily hospitalized in the past 12 months were enrolled from January 2019 and followed up for 12 months. Outcomes were compulsory admission rate, therapeutic alliance (4-PAS), quality of life (S-QOL), mental health symptoms (MCSI), empowerment (ES) and recovery (RAS).

Results: In this communication, we propose to describe the practices of facilitation of peer-workers and analyze outcomes in lights of process measurements (whether or not participants completed PAD document, shared PAD and with whom, met facilitator, used PAD).

Conclusions: Involving peer-workers in the redaction of PADs coherently supports the current shift of mental health care from 'substitute decision making' to 'supported decision making'.

Disclosure: No significant relationships.

Keywords: Advance decision making; Coercion reduction; Psychiatric advance directives; Peer workers

O0083

A systematic review and meta-analysis of the diagnostic accuracy of self-report screening instruments for common mental disorders in Arabic-speaking adults

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Introduction: Self-report questionnaires to screen for symptoms of common mental disorders (CMDs) are commonly used as inexpensive, easy-to-administer tools in research and clinical practice. However, their validity to detect the presence of any CMD across cultures and languages is unclear. Psychometrically sound and brief case-finding instruments are vital for the identification of individuals with mental health needs. With the increasing number of Arabic-speaking refugees in Europe, we aim to evaluate the diagnostic accuracy of Arabic-language screening instruments.

Objectives: The aim of this systematic review/meta-analysis is to synthesize the diagnostic accuracy of self-report questionnaires to detect depression, anxiety and posttraumatic stress disorder (PTSD) in Arabic-speaking populations.

Methods: Five databases were searched (inception-January 2021) (PROSPERO:CRD42018070645) for studies on the diagnostic accuracy of brief questionnaires in Arabic-speaking populations, with a clinical interview as reference standard. Data on sensitivity/specificity were extracted/calculated. Multi-threshold meta-analyses were performed (R diagmeta package). Study quality was assessed using QUADAS-2.

Results: We included 32 studies (N=4042 participants) reporting on questionnaires targeting depression/anxiety (14 questionnaires), distress (2 questionnaires), and PTSD (1 questionnaire). Optimal thresholds were identified for the Edinburgh Postnatal Depression Scale (EPDS; cut-off 11, sensitivity 76.9%, specificity 85.1%), Hospital Anxiety and Depression Scale (HADS) anxiety subscale (cut-off 7, sensitivity 81.9%, specificity 87.7%), depression subscale (cut-off 6, sensitivity 73.0%, specificity 88.6%), and Self-Reporting Questionnaire (SRQ-20; cut-off 8, sensitivity 86.0%, specificity 83.9%).

Conclusions: We present optimal thresholds that can be used by clinicians and researchers for the EPDS, HADS and SRQ-20. More research on Arabic-language questionnaires, especially those targeting PTSD, is needed.

Disclosure: No significant relationships.

Keywords: diagnostic test accuracy; questionnaires; Common mental disorders; sensitivity/specificity

O0086
Aggressive phenotype editing by modulated immune cells
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doi: 10.1192/j.eurpsy.2022.278

Introduction: In human society increased aggressiveness is one of the main social and health problems. Immune cells have a regulatory effect on the central nervous system functions, including regulation of behavior.

Objectives: The aim of the study was to investigate the effect of in vitro neuroleptic-modulated immune cells transplantation on behavioral phenotype and brain cytokines in aggressive syngeneic recipients.

Methods: (CBAxC57Bl/6) F1 aggressive male mice, developed in conditions of social confrontation, were undergoing the transplantation of syngeneic immune cells with in vitro chlorpromazine-modulated functional activity. Recipient’s behavioral phenotyping was performed using modern hardware and software complex EthoVision XT. The brain cytokines content was assessed by ELISA.

Results: It was found that repeated experience of aggression, accompanied by victories, leads to a change in male mice behavior, which manifests itself by increased motor activity, irritability, severe anxiety, and the appearance of stereotypes. Transplantation of chlorpromazine-modulated splenocytes in aggressive recipient was accompanied by decreased motor activity in the Open Field, increased open arm activity in Plus Maze, reflects anti-anxiety behavior; decreased time spent close to the partition and the total duration of attacks after removal of the partitionin resident-