

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 ± 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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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^{1,*}, L. Melo Vidal^{2,3}

¹ Faculdade de medicina de Barbacena, psiquiatria, Barbacena, Brazil

² Prefeitura Municipal de Barbacena, Saúde Mental, Barbacena, Brazil

³ 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 ± 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.