

ECP0010

The role of perinatal care in early life trauma prevention

T. Kurimay*, J. Szederkenyi and A. Hortobagyi

Buda Family Centre Mh Centre Psychiatry, North Centre Buda New Saint John Hospital and Outpatient Clinic, Budapest, Hungary

*Corresponding Author.

doi: 10.1192/j.eurpsy.2021.204

Abstract Body: Mental health support for parents, infants and children as an interdisciplinary, cross-sectoral task has existed for decades in many European countries. A highlighted goal of integrated services (medical, social and educational) is to support competent parenting and the positive parent-child relationship, for the optimal development including mental health of infants and children. In clinical practice, the role of psychiatrists is often linked to healing and rehabilitation, even though we also have an important role in prevention. The mental support, treatment and prevention of psychiatric disorders during the pre-, peri- and postnatal period are often not considered being preventive measures. The perinatal period is the most sensitive and at the same time one of the most important stages of our lives. The traumas suffered during this period affect both the mother and the newborn, in fact it affects the family as a whole. Models for the prevention of early trauma appear at the level of social community and, inter alia, health and social care. Traumas are closely linked to social determinants of health. Gene environment interactions also allow for the transgenerational transmission of trauma. The presentation introduces individual and family levels of interdisciplinary care, good practices and programs the knowledge of which may be important to psychiatrists. How the practicing psychiatrist can contribute to trauma prevention and how to understand the development of resilience. The presenter will detail good practices, and highlight the possibilities for all clinicians on ways to work in their respective field with a trauma preventive approach.

Disclosure: No significant relationships.

Treatment against your will: Views from the stakeholders

ECP0005

Inpatient forensic psychiatric care: Legal provision in European countriesB. Völm^{1,2}¹Forensic Psychiatry, University of Rostock, Rostock, Germany and²Klinik Für Forensische Psychiatrie, Universitätsmedizin Rostock, Rostock, Germany

doi: 10.1192/j.eurpsy.2021.205

Abstract Body: Forensic psychiatry is a specialty of psychiatry primarily concerned with individuals who have either offended or present a risk of doing so, and who also suffer from a psychiatric condition. These mentally disordered offenders (MDOs) are often

cared for in secure psychiatric environments or prisons. However, the organisation of these services differs greatly between countries due to different traditions and legal frameworks. Some countries, e. g., require absent or reduced criminal responsibility (at the time of the index offence) in order to enter forensic services while others determine access on the basis of current need for treatment. Numbers detained in forensic services also vary significantly as does length of stay, raising significant economic and ethical challenges. This talk will present different legal concepts determining admission to forensic-psychiatric services, data on length of stay as well as approaches to risk assessment and treatment in Europe.

Disclosure: No significant relationships.

Mental Health Policy

ECP0006

Use of compulsory treatment by early career psychiatrists: Findings from an international surveyE. Chumakov^{1,2}¹Day Inpatient Department, St-Petersburg Psychiatric Hospital No 1 named after P.P. Kaschenko, Saint-Petersburg, Russian Federation and²Department Of Psychiatry And Addiction, Saint-Petersburg University, Saint-Petersburg, Russian Federation

doi: 10.1192/j.eurpsy.2021.206

Abstract Body:

Introduction: Early Career Psychiatrists (ECPs) are routinely at the front line of clinical practice worldwide, including the use of compulsory measures in psychiatry. However, ECPs practice in this aspect is understudied.

Objectives: The aims of the study were (i) to clarify whether ECPs experience any difficulties in the process of compulsory psychiatric care; and (ii) to find out how ECPs consider compulsory measures in psychiatry.

Methods: An online anonymous survey of ECPs around the world was conducted in July-August 2019. The final sample had 142 psychiatrists (53% female; mean age 32.3±3.1) from 43 countries. Results. 96% of the Early Career Psychiatrists who responded to this survey agree with the continued use of the current legal framework for compulsory psychiatric treatment in their country, either with or without amendments. More than half of the respondents (57%) reported difficulties in providing compulsory psychiatric care due to either challenging interactions with the courts, documentation issues or moral concerns. Over half of the participants (53%) were keen to reform the legal procedures for compulsory psychiatric care in their countries.

Conclusions: The study has shown that there is an agreement among ECPs around the world that legal compulsory psychiatric care procedures are relevant and useful in clinical practice under certain circumstances. As stakeholders, ECPs could be encouraged and involved in adding their own experience and opinions to the debate on the employment of coercion in psychiatry as an ethical and legal issue.

Disclosure: No significant relationships.