

Figure 1: PHQ-9

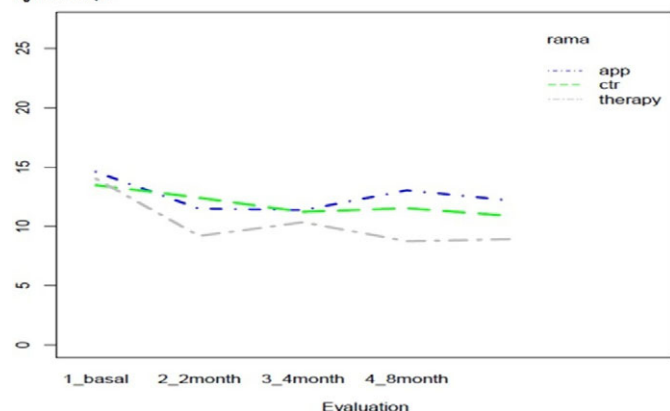


Figure 2: GAD-7

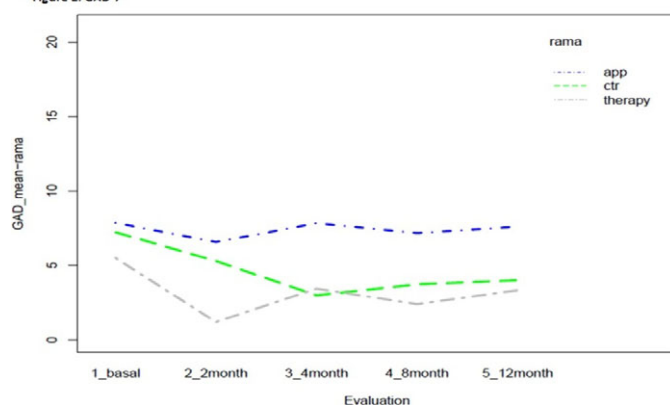


Figure 3: Trauma (PCL)

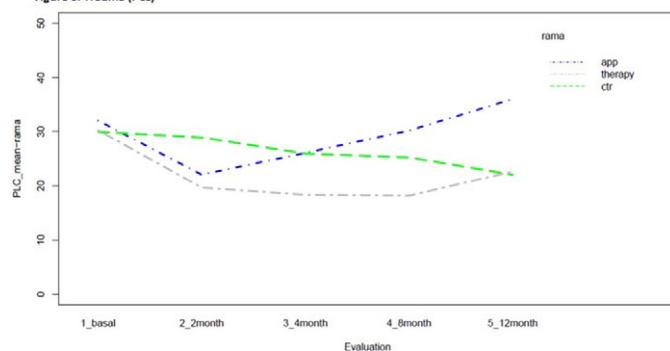


Figure 4: Smoking cessation

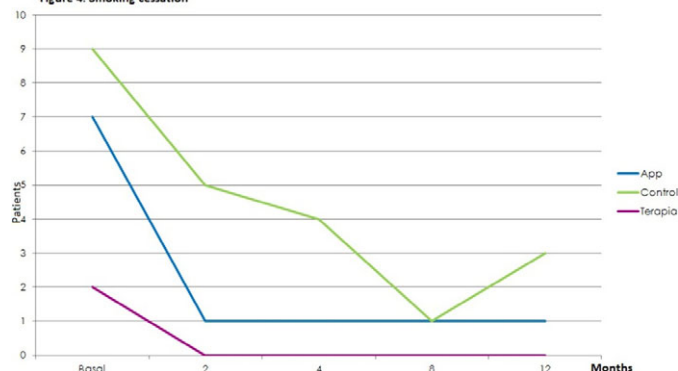
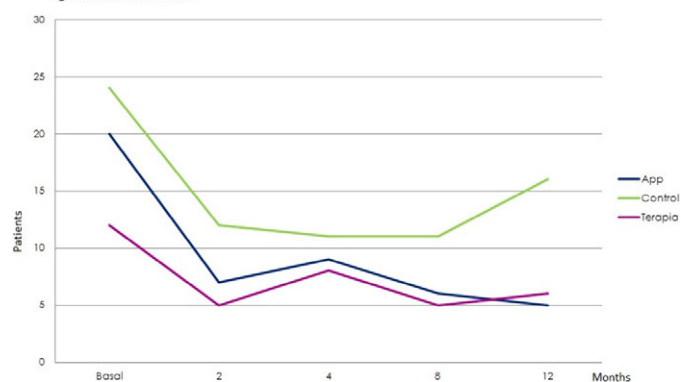


Figure 5: Alcohol Cessation



Conclusions: E-health psychotherapeutic programs could benefit pregnant women with dual disorders. An App/internet implementation could only be useful if focused solely on substances.

Disclosure: No significant relationships.

Keywords: perinatal mental health; dual disorders; Perinatal care

O0080

Daily affective experiences are associated with daily, but not trait-level rumination

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Introduction: Rumination is a transdiagnostic risk factor to psychopathology that has mostly been studied in relation to depression (Nolen-Hoeksema, 1991). However, rumination may also occur in response to positive events and emotions (Feldman et al., 2008), and may be a protective factor as it is associated with higher positive affect (Harding et al., 2017).

Objectives: We aimed to examine ruminative response to positive affect (RPA) in daily life and explore its relationship with daily positive and negative affect. We hypothesized that daily positive and negative affect would be associated with daily RPA even after controlling for trait-level RPA and depressive rumination.

Methods: We carried out a daily diary study with university students ($n=178$). After filling out the baseline survey assessing trait-level rumination, participants had to answer short surveys online about their daily affect and daily rumination every evening for 10 consecutive days. We analyzed our data with multilevel regression in R.

Results: In line with our expectations, daily RPA was significantly associated with daily positive ($\beta=0.16$) and negative affect ($\beta=-0.07$), while trait-level rumination scores were not significantly associated with daily positive and negative affect. The within-person relationship was stronger between RPA and positive affect ($\beta=0.17$) than the between-person relationship ($\beta=0.09$). Daily and trait-level rumination were weakly correlated ($r=0.218-0.284$).

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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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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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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