Introduction: The global burden of common mental disorders is high, particularly for migrants and people living in low-resource settings. Although psychosocial interventions delivered by locally available lay or community health workers are effective, the mechanisms of intervention response are poorly understood. One of the major barriers is that psychosocial interventions are delivered as complex, multi-component 'packages of care'.
Objectives: The aim of the project is to systematically review all randomized controlled trials (RCTs) that have tested the efficacy of task-sharing psychosocial interventions for the treatment of people suffering from common mental disorders (depression, anxiety, and related somatic complaints), to dismantle the intervention protocols, to create a taxonomy of active intervention components, and to re-evaluate their efficacy.
Methods: This project uses a mixed methods approach. In the first phase (qualitative), intervention manuals are reviewed and components are extracted to create a component taxonomy. The components and manual files were transferred to Dedoose, a qualitative data analysis computer software package. An initial two manuals were reviewed by two coders who piloted the entire codebook and assessed inter-rater reliability; any code discrepancies were discussed with a senior author. The two coders independently coded the same manual and repeated until an 80% IRR was achieved. The two coders then divided 12 manuals and coded them separately. In the second phase (quantitative analysis), we will use component network meta-analysis (cNMA) methodology. The main advantage of cNMA is the ability to disentangle intervention components and examine their effectiveness separately or in different combinations. According to the additive cNMA model which we will implement, adding a component "c" to a composite intervention "X" will lead to an increase (or decrease) of the effect size by an amount only dependent on "c", and not on "X". We will denote the corresponding component specific incremental standard mean difference (iSMD) so that iSMDc = SMD(X+c) v. (X). Combining these component-specific iSMDs will allow the estimation of SMD between any two composite interventions.
Results: The component taxonomy will be presented at the conference, along with a network of comparisons and a hierarchy of all intervention components expressed as iSMD, indicating the added benefit of adding a component to an intervention.
Conclusions: By selecting the most effective components, it will be possible to outline a novel task-shifting psychosocial intervention to be tested in future RCTs for the benefit of people with common mental disorders living in low-resource settings. These findings will form the basis for further investigations in the field of precision medicine.

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Others

EPP580

Evaluating the Prevalence and correlates of high stress and low resilience among Educators

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Introduction: High-stress levels can be problematic for teachers and indirectly affect students. Knowledge about the prevalence and predictors of high-stress and low resilience will provide information about the extent of the problem among teachers in Canada.
Objectives: To examine the prevalence and correlates of perceived stress and low resilience among Alberta, Nova Scotia, Newfoundland and Labrador teachers.
Methods: This is a cross-sectional study. Participants self-subscribed to the Wellness4Teachers text-messaging program and completed the online survey on enrollment. Data collection occurred from September 2022 to August 2023. Resilience and stress were respectively assessed using the Brief Resilience Scale (BRS) and the Perceived Stress Scale (PSS-10). Data was analyzed with SPSS version 28.
Results: A total of 1912 teachers subscribed to the Wellness4Teachers program, and 810 completed the baseline survey, yielding a response rate of 42.40%. The prevalence of high stress and low resilience were respectively 26.3%, and 40.1%. Participants with low resilience were 3.10 times more likely to experience high-stress symptoms than those with normal to high resilience (OR = 3.10; 95% CI: 2.18–4.41). Conversely, participants who reported high stress were 3.13 times more likely to have low resilience than those with low to moderate stress (OR = 3.13; 95% CI: 2.20–4.44).
Conclusions: Our study findings infer there's an incidence of high levels of stress and low resilience among teachers in the three Canadian provinces. Governments and policymakers in the education field should integrate stress management and resilient building strategies into teachers' ongoing professional development programs to help prevent and address high stress.

Disclosure of Interest: None Declared

EPP582

Postnatal depression and bonding disorder: A tautology or two overlaping phenomena?

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Introduction: Perinatal disorders occur in 25% of childbearing women. Postnatal depressive symptoms (PDS) have been widely studied, whilst PDS usually overshadows bonding disorder (BD) in clinical practice and research. BD includes mild disorders, such as delay, ambivalence or loss of maternal emotional response, and severe disorders, such as pathological anger or rejection of the child (Brockington et al., Arch Womens Ment Health 2006; 9 (5) 243-251).
Objectives: To estimate the prevalences of PDS and BD in mothers during the six months after birth.