

these symptoms, if they were to be part of the prenatal care programme.

Conclusions: Pregnant women are at risk for various mental health issues which can be prevented with proper care, thus addressing further risk for both the mother and the baby. The need for integrating therapy in prenatal care programmes could have a great impact on the outcome of the pregnancy and even in women desire to bear children.

Disclosure of Interest: None Declared

EPP414

Trauma matters! Trauma-informed care among allied health professionals working with children and youth and its associations with personal factors

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Introduction: Childhood trauma can significantly impact development, function, and well-being. Allied health professionals often support individuals exhibiting trauma-related signs, but the extent of trauma-informed care (TIC) understanding and application remains unclear. Moreover, secondary traumatic stress (STS) is a significant concern for professionals who treat traumatized children and youth. Thus, it is essential to provide TIC training to these professionals while also addressing the potential effects of STS.

Objectives: The current study mapped the knowledge of trauma, the perceived relevance of TIC, and its implementation among allied health professionals working with children and youth. It also examined the relationships between knowledge of trauma, TIC perceived relevance and implementation, and relevant personal factors (resilience, self-compassion, and empathy).

Methods: 176 allied health professionals (nutritionists and occupational, speech, and physical therapists) answered an online survey including a demographic questionnaire, Trauma-Informed Approach Questionnaire, Connor-Davidson Resilience Scale, Self-Compassion Scale, and Interpersonal Reactivity Index. Descriptive statistics and ANOVA were used to describe the sample and assess differences between knowledge, attitudes, and implementation. Pearson correlations were used to assess relationships with personal factors.

Results: Significant differences were found between trauma knowledge, TIC relevance perception, and TIC implementation among the entire sample, $F(2, 352) = 127.5, p < .001, \eta^2 = 0.43$. Perception of TIC relevance was higher than knowledge of trauma ($p < .001$) and TIC implementation ($p < .001$). Positive correlations were found between resilience and knowledge of trauma ($r = .22, p < .01$), TIC perception relevance ($r = .17, p < .05$), and TIC implementation ($r = .23, p < .05$). Self-compassion was positively correlated with knowledge of trauma ($r = .18, p < .05$) and TIC implementation ($r = .22, p < .01$). Perspective-taking (empathy) was positively

correlated with knowledge of trauma ($r = .15, p < .05$), perception of TIC relevance ($r = .39, p < .01$), and TIC implementation ($r = .31, p < .01$), and empathic concern was positively correlated with perception of TIC relevance ($r = .33, p < .01$).

Conclusions: The findings highlight the limited knowledge of trauma and TIC implementation among allied health professionals, emphasizing the lack of TIC training. Resilience, self-compassion, and empathy can be strategies to cope with treating children and youth who have experienced trauma and prevent STS.

Disclosure of Interest: None Declared

EPP415

Community mental health centres in Slovenia: assessment of the situation and needs

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Introduction: Mental health reform was accepted in Slovenia in 2018 to provide accessible community treatment and care regionally for 40-70000 population. The implementation took place mostly with establishment of community mental health centers (CMHC), which included around 20 000 patients in 16 community centers for the adult population. These CMHCs provide triage, needs assessment and treatment plans. The National Mental Health Plan did not address the development of rehabilitation services. The institutional costs of treatment and care were not reduced, as well as not the number of institutional beds.

Objectives: To assess the development of CMCH's in Slovenia on the grounds of the data from the CMHC Logatec.

Methods: The data about 5761 patients included in the treatment process in one of the CMHCs were gathered regarding basic demographic data, diagnosis and treatment mode, including the definition of care coordination.

Results: 2654 patients were treated in the home environment. Medical nurses were coordinating treatment in the majority of these patients. Occupational therapist, social worker and psychiatrists were part of the team in this group. 816 patients in this group were diagnosed with dementia and had also somatic illness. 1011 were diagnosed with schizophrenia or other psychotic disorders. 3107 patients were treated in the outpatient care, the majority of them by psychologists. Psychiatrists and social worker were included in these care coordinating teams. 1219 of them were diagnosed with depressive and 1001 anxiety disorders.

Conclusions: Community care teams in Slovenia included around 20 000 patients in three years time. The majority of these, specifically in Logatec are diagnosed with schizophrenia, dementia, depressive and anxiety disorders. Immediate access to service is still granted, with exception of psychological treatment which does not reach everybody in need in time. Development of CMCH's should be led by needs assessment on the ground of developing data. It's already obvious that increase of the number of psychologists to

improve psychological assistance to people with cognitive decline and for young people in severe but mostly manageable psychological crisis is needed.

Disclosure of Interest: None Declared

EPP416

The relationship between lifestyle and negative affect. Executive functioning and emotional regulation as mediators.u

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Introduction: The increasing prevalence of mental health issues presents a significant challenge for modern societies. There's a crucial need for quick, affordable interventions that can be widely implemented by practitioners to support as many individuals as possible.

Objectives: In this paper we aimed to investigate the mediating role of executive functions and emotional regulation in the relationship between sleep quality and physical activity, on one hand and negative affect, on the other.

Methods: Our proposed model is a serial mediation model, with executive functions as the first mediator and the two components of emotional regulation as the second mediator. We collected data from 286 participants who completed a series of questionnaires.

Results: The initial model did nit fit the data well. Therefore, we added two paths: the direct relationship between sleep quality and negative affect and the direct relationship between executive functions and negative affect. The final model had a very good fit with the data. Thus, both the hypotheses regarding the direct relationships and those regarding the indirect relationships are supported by the data.

Image 1:

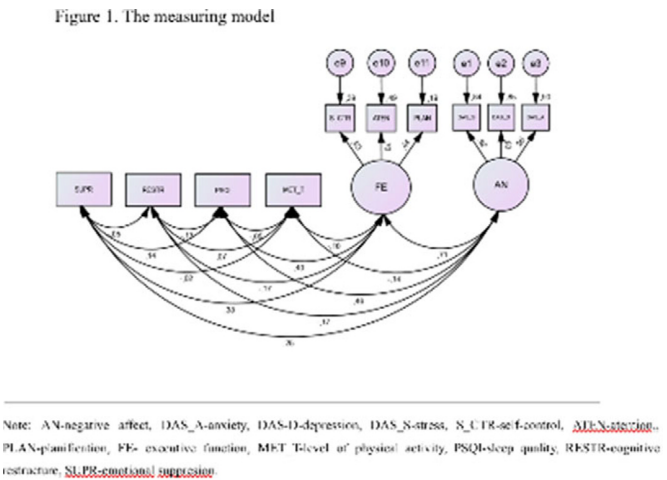


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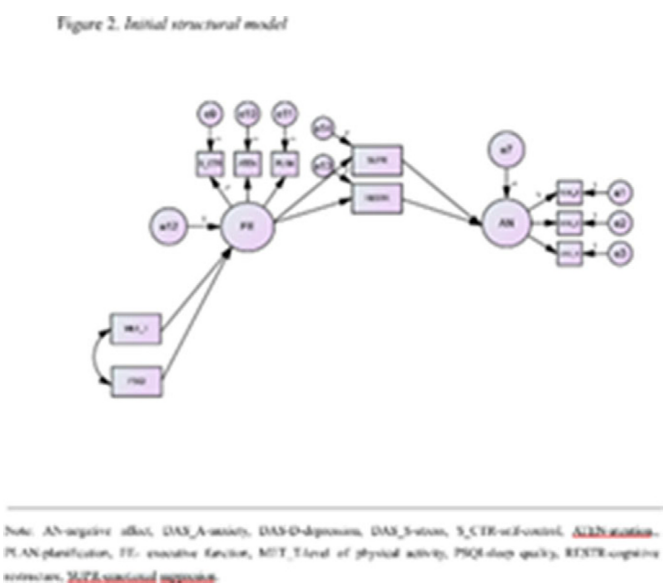
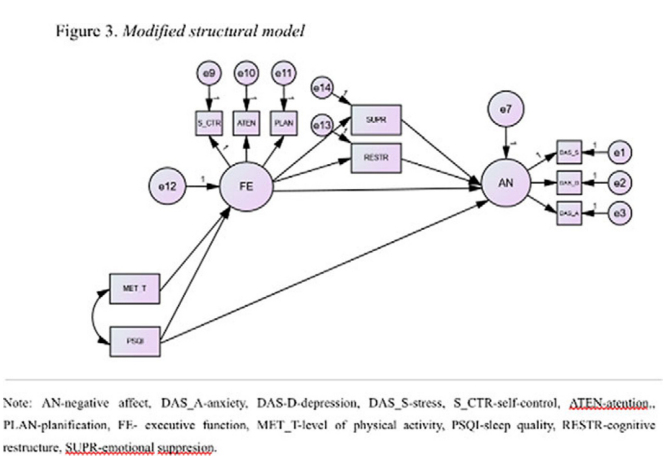


Image 3:



Conclusions: The results highlight the importance of interventions aimed at improving sleep quality and promoting physical activity. These interventions can serve to promote optimal mental health in both clinical and non-clinical populations. Additionally, this research provides a basis for developing effective strategiesfor the prevention and treatment of these populations.

Disclosure of Interest: None Declared