

traumatic process that involves multiple ER visits and attempts at receiving care.

**Conclusions:** We propose formally distinguishing between two forms of waiting for services: passive waiting, which is the state of being on a wait-list, and active waiting, which begins at symptom onset and includes the complex struggle to receive stable care. Early intervention programs' efforts to reduce passive waiting are important, but the high burden of active waiting suggests a need for larger efforts such as clinician education and systemic changes in how patients access healthcare. Reducing active wait times could truly transform how first episode psychosis is managed and improve outcomes for those in urgent need.

**Disclosure of Interest:** None Declared

## Suicidology and Suicide Prevention

O073

### Perfectionistic concern profile as a risk factor for suicide-related behaviour in adolescents: Results from the EPISAM-School Study

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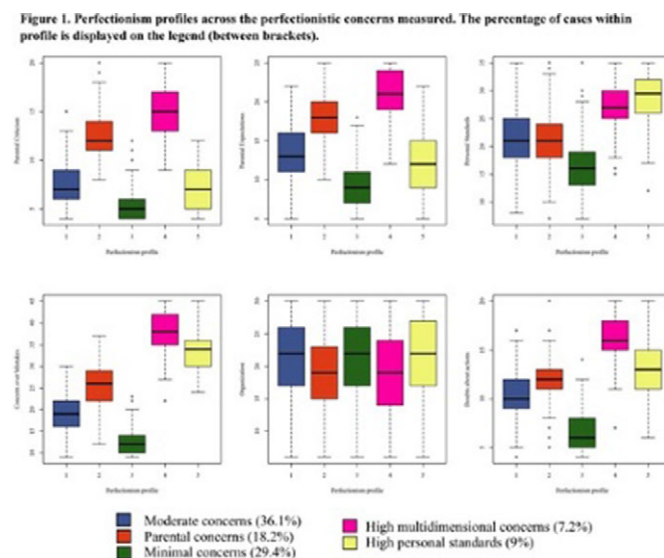
**Introduction:** Adolescents are at increased risk of developing suicide-related behaviour (SRB). Varying contributing factors may play an important role across the different forms of SRB. Perfectionistic concerns may become a cognitive moderator influencing volitional moderators (e.g., non-suicidal self-harm, NSSH) and suicidal ideation escalation.

**Objectives:** To identify profiles of perfectionistic concerns in a community sample of adolescents. Also, to study the relationship between suicide-related outcomes and NSSH, according to perfectionism profile.

**Methods:** A sample of 1,526 adolescents (54.3% female;  $M = 13.81$  years,  $SD = 1.28$ ) participated in our study. A wide range of SRB and motivational and volitional risk factors were evaluated in school settings. Six types of perfectionistic concerns, assessed by the Frost Multidimensional Perfectionism Scale (FMPS), were used to identify perfectionism profiles, through latent profile analysis.

**Results:** Almost one in five adolescents (19.5%) showed SRB risk and more than one in three adolescents (35.1%) engaged in NSSH in the last year. Five profiles of perfectionism were identified (Figure 1). The profile featured by higher concerns across perfectionistic domains (7.2% of participants) showed significant relationship with SRB risk ( $OR = 2.84$ ) and suicidal ideation ( $OR = 1.22$ ), in comparison to the minimal concern profile. On the other hand, the profile featured by high parental concerns (18.2% of adolescents) was associated with increased risk of ideation ( $OR = 2.75$ ) and NSSH ( $OR = 1.51$ ).

Image 1:



**Conclusions:** Perfectionism may constitute a key risk factor for NSSH and SRB development. The promotion of prevention programmes to enhance cognitive regulation skills may help prevent suicide in adolescents.

**Disclosure of Interest:** None Declared

O074

### Epidemiology of suicidal behavior in Catalonia, Spain

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**Introduction:** Suicide is a global public health issue. According to the World Health Organization (WHO), more than 700,000 people die by suicide worldwide each year. In 2019, it was the fourth leading cause of death among those aged 15 to 29 globally. In Spain, suicide has been the leading cause of external death in recent years, which has motivated in some regions the implementation of preventive strategies, such as *Codi Risc de Suïcidi* (Suicide Risk Code). **Objectives:** This study examines the epidemiology of suicidal behavior in the Catalan population between 2010 and 2019, exploring geographical disparities and the influence of different socio-demographic and clinical variables on the incidence of suicidal ideation and suicide attempt.

**Methods:** All residents in Catalonia who attended the public health system from 2010 to 2019 were included in the study. Data were obtained from the *Program d'anàlisi de dades per a la recerca i la innovació en salut* (PADRIS) of the *Agència de Qualitat i Avaluació Sanitàries de Catalunya* (AQuAS). Data on geographical,