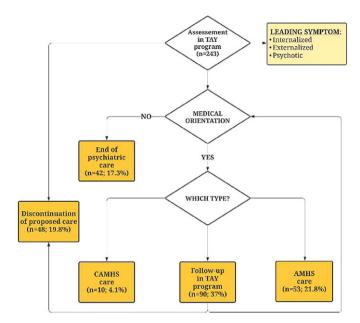
S101 European Psychiatry



**Conclusions:** This TAY-tailored psychiatric outpatient program represents an innovative contribution to reinforce CAMHS-AMHS interface in French-speaking Belgium. This study enlightens the importance to enhance clinical expertise in youth mental health. Classical boundaries, determined by artificial variables such as age or type of psychopathology, do not seem to be efficient criteria to achieve a good quality psychiatric evaluation and continuity of care in TAY.

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Keywords: AMHS; mental health; transitional age youth; CAMHS

## 00099

## Understanding the value and impacts of informal care for people living with poor mental health

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EUFAMI, Family, Leuven, Belgium doi: 10.1192/j.eurpsy.2022.289

**Introduction:** Our survey of more than 700 caregivers across Europe and Canada highlights the tremendous and too often hidden value of caregiving. In short informal carers are fundamental to the functioning of any health and social care system; it is critical to therefore to invest in measures to support these caregivers and identify potential risk factors that might lead to a breakdown in caregiving support.

**Objectives:** To identify the importance of family care in the context of modern community mental health services.

**Methods:** Survey questionaire and interview of family members. A survey was developed in consultation with EUFAMI.

Results: The average length of the caring week exceeds the length of the working week On average informal carers provide more than 43 hours of care every week, well in excess of the average working week.

**Conclusions:** Family care needs to be recognised as a significant part of the overall care package in differenct countries. Governments need to acknowledge the real cost of care. In our report we have highlighted that the average caring week is much longer than the working week. and that this is over 60 hours per week for carers who live with the person that the care for. We have highlighted major detrimental effects on carer quality of life, as well as high levels of loneliness. We have also noted that more than a quarter of all carers have a depression or anxiety disorder. We have seen wider adverse impacts on potential career and education prospects as well as financial worries.

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Keywords: Recovery; caring; value

## **O0100**

SERVICE INNOVATION (SOUL PROGRAMME) -Charitable home-based outreach service for treatment of schizophrenia in Larkano, Pakistan: development, implementation and 10 year outcomes.

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**Introduction:** There is a huge resource gap in mental health service provision & service utilisation in LAMIC including Pakistan. SOUL Programme has been established in the City of Larkana, on charitable donations, which utilises principles of home-based outreach and produces clinical and functional outcomes.

Objectives: SOUL programme focuses on collaborative working with patients & families. The objectives include recognition, treatment, family education & psychosocial support to maximize clinical, functional & occupational outcomes.

**Methods:** Single cohort intervention (patients recruited on continual basis over time) with innovative service structure and culturally relevant open label intervention design developed with local academic psychiatric unit in Larkano, Pakistan. Training was provided to local mental health professionals on diagnosis, delivering care & use of recognized clinical outcome measures.

**Results:** We have recruited a cohort of 160 patients on continual basis over time. Our analysis show a higher BPRS and lower GAF ratings for men in comparison to female cohort at the baseline. Our Ten year follow up has demonstrated statistically significant clinical / functional improvement on BPRS, CGI & GAF measures. The mean differences recorded for the individual measures after 12 months were BPRS, CGI-I and GAF and were all statistically significant. Innovative home-based community mental health intervention shows significant improvements in clinical and functional outcomes (with good effect size).