



Figure 2: Forest plot showing the prevalence rates of oppositional defiant disorder with level of education as the unit of analysis.

Conclusions: Gender, culture and socioeconomic diagnostic inequality may contribute to prevalence differences across countries. Routine screening and addressing these aspects may facilitate early intervention.

Disclosure: No significant relationships.

Keywords: Child; prevalence; Europe; oppositional defiant disorder

EPV0092

Community treatment for adolescents with mental health problems

A. Diaz-Caneja^{1*}, A. Hernández¹ and M.I. Toral²

¹Day Hospital For Children And Adolescents, Servicio Murciano Salud, Cartagena, Spain and ²Day Hospital For Children And Adolescents, Servicio Murciano salud, Cartagena, Spain

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.1699

Introduction: This is the case of a 15-year-old boy who had been socially isolated in his house for over 1 year. He had become increasingly agitated, but refused any help offered.

Objectives: To establish the role of community treatment in adolescents with mental health problems.

Methods: Summary of the interventions taken place during the treatment

Results: Initially this young person refused any medical treatment, so we tried first supportive therapy and CBT. He did not obtain any benefits as he appeared to experience paranoid ideation and thoughts of being persecuted in the streets. With support from the occupational therapist, the young person started to take care of his personal hygiene. Afterwards he started to take oral medication with partial response. We decided to switch to im treatment. In conjunction with CBT, the young person was gradually able to leave the house. All the sessions during the first few months took place at his family home. These visits were weekly or twice weekly. Once he left the house, he attended the groups at the day hospital. After 18 months, he was discharged without medication and he is currently studying for a degree.

Conclusions: Community treatment in adolescent with mental health problems is a better option to establish good rapport and avoid stressful situations that could take place in an in-patient facility.

Disclosure: No significant relationships.

Keywords: Community treatment; adolescents; mental health

EPV0094

Treating children with disinhibited social engagement disorder symptoms: Filial therapy

S. Hatam^{1*}, S. Moss¹, C. Cubillo² and D. Berry³

¹Health And Human Science, Charles Darwin University, Darwin, Australia; ²Amsant, Aboriginal Medical Services Alliance Northern Territory, Darwin, Australia and ³Play Therapy, Play Therapy Australia, Perth, Australia

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.1700

Introduction: Children affected by social neglect and other forms of abuse are at significant risk of developing mental health problems as well as social, academic, and behavioral functioning difficulties. Some studies have assessed the effectiveness of treatment for children with trauma-attachment disorder. Nevertheless, some questions remain to be answered regarding appropriate treatment.

Objectives: Aim This research identified how filial therapy affects the extent to which foster parents are responsive, sensitive, and attentive to the needs of their children in their care. Subsequently, the study explored how this bond, influenced during filial therapy, affects the signs and symptoms of disinhibited social engagement disorder.

Methods: Method This study used case study as the methodology to research the influence of filial therapy (CPRT) in foster children who show the symptoms of disinhibited social engagement disorder- aged three to six. Two sets of foster parents received a 10-session filial therapy model (CPRT) across 10 weeks. Pre and post measures of the parent-child relationship were analyzed.

Results: Result The findings indicate that filial therapy greatly enhances the bond between foster parents and children with DSEDs. Moreover, these improvements in the bond diminished the symptoms of disinhibited social engagement disorder.

Conclusions: Conclusion The impact of filial therapy as a responsive intervention reduced the symptoms of disinhibited social engagement disorder. The symptoms have declined very likely as a result of rebuilding, regenerating, and enhancing the relationship between foster children and foster parents.

Disclosure: No significant relationships.

Keywords: Filial Therapy; attachment disorders; Disinhibited Social Engagement Disorder; play therapy

EPV0095

Environmental stressors associated with suicidal behavior in adolescents with psychiatric pathology

S. Pérez Sánchez^{1*}, I. Martín Herrero¹, M.A. Cutillas Fernández¹, D. Raya Güimil¹ and A. Crespo Portero²

¹Servicio De Psiquiatría, Servicio Murciano de Salud, Murcia, Spain and ²Servicio De Psiquiatría, Servicio Murciano de Salud, Lorca, Murcia, Spain

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.1701

Introduction: In the assessment of suicidal behavior, recent studies describe the great influence of an environmental component with adverse life events and stressors that can influence self-harm ideation and gesture.

Objectives: 1. To analyze the reasons for consultation of adolescents between 11 and 17 years of age who consult for suicidal behavior. 2. To estimate the frequency of the different socio-family life events.

Methods: A retrospective review of the emergency room visits in the last 3 months was carried out. Sociodemographic data, vital