

system. This condition is enhanced by stress. In turn, stress symptoms are a risk factor for the onset and progression of MS. However, knowledge about predictors of stress in patients with MS is scarce.

Objectives: This preliminary study aimed to verify whether the number of relapses, fatigue, physical disability (MS characteristics), experiential avoidance and self-judgment (emotion regulation processes) predict stress symptoms in patients diagnosed with MS.

Methods: A convenience sample of 101 patients diagnosed with MS and without other neurological diseases participated in this study. Participants completed the Depression Scale of the Depression, Anxiety and Stress Scales-21, Analog Fatigue Scale, World Health Organization Disability Assessment Schedule-12, Acceptance and Action Questionnaire-II, and Self-Judgment Subscale of the Self-Compassion Scale.

Results: All predictors initially hypothesized and years of education have significant correlations with stress symptoms. Simple linear regression analyses showed that the variables significantly predicted stress symptoms and were, therefore, included in the multiple linear regression model. This model explained 51.8% of the variance of the stress symptoms and showed that years of education, the number of relapses, fatigue, and experiential avoidance significantly predicted those symptoms.

Conclusions: The promotion of mental health mental in patients with MS must develop functional skills to deal with stress induced by years of education (possibly responsible for the degree of awareness about MS and its consequences), recurrence of relapses and fatigue, and should minimize emotion regulation strategies focused on experiential avoidance.

Keywords: Multiple sclerosis; predictive model; clinical characteristics of multiple sclerosis; emotion regulation processes

EPP0995

Improving hospitalization in children and adolescents through animal assisted interventions (AAIs): A systematic review

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Introduction: Animal Assisted Interventions (AAIs) are increasingly introduced in pediatric care settings as a mean to promote the physical, mental, and emotional well-being of hospitalized children and adolescents and the humanization of the hospital environment.

Objectives: The aim of this work was to review published studies implementing AAIs in hospital settings and to assess their effectiveness in reducing stress and pain, ameliorating social behavior, quality of life, and mood in pediatric patients. Reviewed interventions were also evaluated for their effects on caregiver's stress and burden, as well as on perception of the work environment in hospital staff.

Methods: Studies were systematically searched using PubMed, Scopus, ProQuest and Web of Science databases in accordance with PRISMA guidelines. The search was aimed at identifying studies examining the effects of AAIs on behavioral and

physiological response to stress in children and adolescents (0-18 years) formally admitted to a hospital for a stay, as well as in those undergoing a visit for treatments or medical examinations.

Results: Of 350 studies screened, 17 were eligible for inclusion. Most of them focused on stress, pain and anxiety reduction in pediatric patients, and used both physiological parameters and behavioral observations/scales. The vast majority of the studies employed dogs. Results show the potential of AAIs to reduce anxiety and behavioral distress in pediatric patients, while acting on physiological measures associated with arousal.

Conclusions: Although further studies of better quality are still needed, the findings of this review may have implications for clinical practices suggesting appropriate planning of AAIs by pediatric healthcare professionals.

Keywords: humanization of care; stress and pain reduction; Animal Assisted Interventions; Pediatric Hospital

EPP0996

Evaluation of the impact of a socio-educational intervention in quality of life and mental health of institutionalized elderly

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Introduction: With the huge increase of life expectancy in developed countries, new needs for long-term care arise in order to guarantee an active ageing for an increasing older adult population. One way to promote emotional well-being and quality of life in elderly is through socio-educational interventions.

Objectives: To test the effects of a socio-educational intervention in quality of life and mental health of institutionalized elderly.

Methods: This study employed a pretest-posttest design. Measures: Portuguese version of Mental Health Inventory (Ribeiro, 2001) and WHOQOL-OLD (Vilar, Sousa & Simões, 2009). Qualitative assessment was made using a logbook. Participants: 15 institutionalized elderly, 60% females, with mean age of 82.5 years (sd=8.5). The intervention ran for 2 months, with 12 group sessions, 60 minutes each, held twice a week. A nonparametric paired samples tests was conducted to evaluate the impact of the intervention.

Results: After the intervention, results showed a significant increase of total value of mental health ($p=.021$). Concerning dimensions: significant increase of positive psychological well-being ($p=.014$), emotional ties ($p=.050$), positive affect ($p=.004$), behavioural emotional control ($p=.018$), and a significant decrease of depression ($p=.043$). Concerning quality of life, the results showed a significant increase of the mean values of the facets: social participation and intimacy ($p=.005$; $p=.027$, respectively).

Conclusions: Overall, the intervention implemented with institutionalized elderly had good results, with significant increase of positive psychological well-being and decrease of depression. Although there was no control group, the results suggest that the socio-educational intervention implemented can contribute to promote mental health in elderly.

Keywords: mental health promotion; PSYCHOLOGICAL WELL-BEING; quality of life; Elderly

EPP0997

The effect of job stress appraisals on mental health among health professionals: The mediating role of work engagement

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Introduction: Health professionals face an increased risk of developing mental health difficulties due to work-related stress. It has been demonstrated that work engagement has a protective role on mental health from work-related stress. The majority of the research on the psychological impact of job stress among health professionals focused on the work-related stressors or the type of stressors as challenges or hindrances. However, the impact might depend on an individual's appraisal of challenges and hindrances.

Objectives: - Examine the effects of job appraisals on mental health.
- Establish the role of work engagement as a mediator between them.

Methods: An online survey was completed by 196 health professionals and included questionnaires about job appraisals, stressors (variety of tasks, responsibility and cooperation with colleagues), work engagement, anxiety and depression.

Results: Appraising stressors as challenges did not have any direct impact on mental health, whereas hindrance appraisals had a negative influence. Participants who appraised cooperation with colleagues as challenging reported lower levels of depression through higher work engagement ($B = -0.17$, 95% CI $[-0.354, -0.027]$). Appraising variety of tasks as a hindrance predicted higher levels of depression through lower work engagement ($B = 0.150$, 95% CI $[0.041, 0.289]$). Participants appraising the other two stressors as hindrances were more anxious and depressed through lower work engagement.

Conclusions: The negative psychological impact of hindrance appraisals was persistent, whereas the positive impact of challenge appraisals through work engagement depended on the stressor. Stress interventions may need to consider both the type of appraisal and the type of stressor.

Keywords: health professionals; work engagement; Depression; Anxiety

EPP0998

Social networks, depressive symptoms and quality of life in the elderly: Results of an intergenerational program

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Introduction: Intergenerational programs involving children and the elderly promote intergenerational interactions and can positively affect physical and mental health, and the quality of life of the elderly.

Objectives: To test the effects of an intergenerational intervention in social isolation, depressive symptoms and quality of life of the elderly.

Methods: This study employed a pretest-posttest design. Measures: Portuguese versions of Geriatric Depression Scale, Lubben Social Networks Scale and WHOQOL-OLD. Participants: 12 elderly, 75% females, with mean age of 80.8 years ($sd=8.8$) and 20 kindergarten children (65% female) with mean age of 4,1 years ($sd=0.79$). The intervention ran for 6 weeks, with 11 intergenerational group sessions, each range between 30 and 120 minutes. A nonparametric paired samples tests was conducted to evaluate the impact of the intervention.

Results: After the intervention, when comparing elderly with and without depressive symptoms, results showed significant differences in the total value of quality of life ($p=.048$) and in the facets: 1) Sensory functioning, 2) Autonomy, 3) Past, present and future activities ($p=.003$; $p=.018$; $p=.030$, respectively). 12,5% of de elderly with depressive symptoms before the intervention no longer have depressive symptoms after the intervention. Regarding social networks, there were no significant differences ($p=.576$) between the mean values of the two assessments.

Conclusions: The implemented intergenerational program was effective in promoting quality of live and minimized depressive symptoms. After the intervention, the number of the elderly without depressive symptoms have increased and these presented a higher quality of life. Finally, longitudinal studies with a large sample are needed to consolidate results.

Keywords: quality of life; Elderly; Intergenerational; depressive symptoms

EPP0999

Does the crisis intervention team (CIT) training improve police officers' knowledge, attitude, and mental health stigma?

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Introduction: The Crisis Intervention Team (CIT) training was developed to educate police officers regarding the complexity of mental health (MHI) issues, and better prepare them for crisis encounters with persons with mental illness (PwMI).

Objectives: To determine if CIT training improves police officers' knowledge, attitude, and stigma about mental health issues.

Methods: A systematic review followed the PRISMA protocol and was conducted on the PubMed database (Figure 1). Search strings were "crisis intervention team training," "crisis intervention team," "CIT," "effectiveness," and "police." Inclusion eligibility required primary studies using surveys that measured the CIT training outcomes (i.e., knowledge, attitude, and stigma). Literature/narrative reviews or opinions were excluded.