

Conclusions: The present study shows that the level of stress is quite high among mothers of babies hospitalised in neonatology during the postnatal period and that this symptomatology can last for months after discharge.

Prevention and reduction of stress induced by postnatal hospitalisation through parental guidance and psychological support for mothers strengthens interactions and the mother-baby bond.

Disclosure of Interest: None Declared

EPV0164

Postnatal hospitalization and self-esteem in mothers

K. Chiha¹, K. Khemakhem¹, C. Regaieg², D. Ben Touhemi¹, H. Ayadi^{1*}, N. Hmida², A. Gargouri² and Y. Moalla¹

¹Child Psychiatry and ²Neonatology Department, Hedi Chaker University Hospital, Sfax, Tunisia

*Corresponding author.

doi: 10.1192/j.eurpsy.2023.1515

Introduction: Hospitalization in neonatology constitutes a narcissistic wound for the mother. This mother-baby separation disturbs the maternal identity and generates a strong feeling of failure and guilt.

Objectives: To assess self-esteem in mothers of babies hospitalised during the postnatal period in the neonatal unit and to identify risk factors associated with the persistence of low self-esteem 3 months after discharge.

Methods: This was a longitudinal, descriptive and analytical study conducted between April and September 2021. The sample consisted of mothers of babies hospitalized in the neonatology department of Sfax-Tunisia for a period ranging from 5 to 15 days. Socio-demographic data were collected using a pre-established form. Self-esteem was assessed during the baby's hospitalisation and 3 months after discharge, using the Rosenberg self-esteem scale, with 10 items, validated in Arabic.

Results: The sample consisted of 86 mothers with a mean age of 32.17 years.

Low to very low self-esteem was found in mothers in 81.20% of cases when their babies were hospitalised and in 68.40% of cases 3 months after discharge.

Some factors were significantly related to the persistence of low self-esteem in mothers after 3 months of their babies' hospitalisation, such as a low educational level of the mother ($p=0.017$), an unattended pregnancy ($p=0.034$), the occurrence of a post-partum complication ($p=0.043$) and the absence of the first smile in the baby at the age of 3 months ($p=0.008$).

Conclusions: This study shows a high prevalence of low self-esteem in mothers following hospitalization of their babies in the postnatal period. The concomitance with several socio-clinical factors contributes to the persistence of this low level of self-esteem in these mothers.

Appropriate early and multidisciplinary care helps to rebuild strong self-esteem in the young mother so that she can overcome her psychological difficulties and build a solid foundation for the mother-baby bond.

Disclosure of Interest: None Declared

EPV0165

Mind that gap: A national survey of school-based approaches for improving student well-being

H. Thabrew

Department of Psychological Medicine, University of Auckland, Auckland, New Zealand

doi: 10.1192/j.eurpsy.2023.1516

Introduction: Student well-being is an area of increasing interest for schools around the world. However, the extent to which school-based well-being and mental health interventions are currently being delivered by different schools has not previously been explored in many countries, including New Zealand.

Objectives: This survey of a nationally-representative sample of schools was undertaken to identify: what well-being and mental health interventions were being used by primary (elementary) and secondary (high) schools and what gaps exist between current practice and the evidence-base.

Methods: Forty staff from 37 (22 primary, 13 secondary and 2 composite) schools across New Zealand participated in semi-structured interviews. Data was analysed for key themes and sub-themes using Braun and Clarke's method.

Results: Seven key themes were identified: 1) staff awareness and enthusiasm about student well-being and mental health; 2) existence of specific interventions to support student well-being and mental health; 3) support for government-sponsored programmes; 4) limitations of existing programmes; 5) drivers of new interventions; 6) barriers to implementation; and 7) suggestions for future interventions and their implementation.

Conclusions: Despite enthusiasm from educators for interventions with which to improve student well-being, there is a gap between intention and activity. Students are receiving primarily non-evidence based interventions in a variable manner due to staff and cost-related barriers. We suggest ways for health and education providers in New Zealand and elsewhere to address these issues, as well as avenues for further research.

Disclosure of Interest: None Declared

EPV0166

Clinical improvement of teens participating in a dbt skills training

I. Ezquiaga Bravo*, A. M. Rodríguez, A. Vilar, A. Salvador, M. Biempica, K. M. García, L. M. Martín and S. Batlle

INAD, Parc de Salut Mar, BARCELONA, Spain

*Corresponding author.

doi: 10.1192/j.eurpsy.2023.1517

Introduction: Dialectical behavioural therapy (DBT) developed by Linehan has been shown to be widely effective in improving emotional regulation capacity in patients diagnosed with borderline personality disorder in adults and adolescents, but also for other profiles of emotional dysregulation, even in the general non-clinical population through emotional regulation skills training programs in schools.