### **O075**

# Rapid implementation of a support intervention for bereavement at the beginning of the COVID-19 pandemic

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**Introduction:** There have been over 900,000 deaths from COVID-19, with more than 3 million people bereaved. These deaths are associated with factors leading to poor bereavement outcomes, and distress in frontline-staff

**Objectives:** to (i)present the rapid implementation of an intervention for bereavement support; (ii)characterize first calls and follow-up.

**Methods:** We recruited a multidisciplinary team and prepared a structure called "SIB" (Support and Intervention for Bereavement) in a matter of days. There were three steps for the support (Screening, First-line intervention, Second-line intervention (short follow-up). We collected data screening risk factors for complicated grief (CG). **Results:** Between March 24th-May 14th (lockdown, March 16th-May 13th), the hotline received nineteen calls for an intervention. The hospital contacts were various, including mortuary. Fifteen relatives were followed, among them thirteen bereaved for ten deaths (on 52 deaths=19.23%). Dead persons were young (m=59.68 years-old, SD=15.25). All contacts reported several risk factors for a CG (no "goodbye" (100%), no funeral rituals (82.35%)). Six relatives were addressed for short follow-up.

**Conclusions:** The actual pandemic is at high risk for complicated grief and may until 2021. We hope that all hospitals would implement basic bereavement outreach programs to prepare families for the death and to support them afterwards, as well as provide basic support to frontline staff.

**Disclosure:** No significant relationships. **Keywords:** covid-19; bereavement; grief; family support

#### **O076**

## Fear of infection and optimism predict following stayat-home recommendations during COVID-19 pandemic in russian young people

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**Introduction:** . Self-isolation regime is an effective measure to contain the pandemic (Alfano, Ercolano, 2020), but the psychological factors predicting compliance with stay-at-home recommendations

(CSHR) are understudied. We hypothesized that 1) defensive optimism and constructive optimism will have opposite effects on CSHR, 2) the effect of defensive optimism will be mediated through a decrease of anxiety (fear of infection).

**Objectives:** . The purpose of this study was to assess the direct and indirect (through the fear of infection) effects of defensive optimism (belief that coronavirus problem is exaggerated) and constructive optimism (belief that people's efforts help to prevent infection and spread of the virus) on CSHR, controlling for dispositional optimism.

**Methods:** A longitudinal study (from 10/4/2020 till 2/6/2020) was conducted on a sample of 306 university students (89% women, MA=21.20, SD=4.54) using a single-item measure of CSHR, LOT-R (Scheier et al., 1994), the scales of defensive and constructive optimism (Gordeeva, Sychev, 2020), and anxiety in a pandemic situation questionnaire (Tkhostov, Rasskazova, 2020).

**Results:** . During seven-week interval CSHR has decreased dramatically (Cohen's d=0.66, p<0.001) while the other variables remained stable. Using SEM we have showed that CSHR at the end of study (T2) is predicted by the CSHR (T1) and through it by the defensive optimism (negative effect, p<0.05) and constructive optimism (positive effect, p<0.001). Negative effect of defensive optimism on CSHR is also mediated by the fear of infection (T2), reducing it. Dispositional optimism is associated only with constructive optimism.

**Conclusions:** . Defensive and constructive optimism/ pessimism are essential in explaining health-related behavior.

Disclosure: No significant relationships.

**Keywords:** Fear of infection; Defensive optimism; COVID-19 pandemic; stay-at-home recommendations

#### **O077**

# Emotional response to illness in patients hospitalized with COVID-19 in russia

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**Introduction:** The situation of Covid-19 disease, associated with a high threat to life and uncertainty, had not only somatic, but also psychological consequences for most patients. Emotional reactions of patients to hospitalization and ways to cope with what is happening have become the subject of study in different countries.

**Objectives:** To assess the severity of signs of depression and anxiety and to study the methods used to regulate the emotional state in patients with COVID-19 at the time of hospitalization.

**Methods:** The study volunteered 127 hospitalized patients with Covid-19 (67 men (52.8%) and 60 women (47.2%), aged 19 to 77 years, who completed the following methods: Sociological questionnaire, Beck Depression Questionnaire, GAD-7, F-SOZU-22, CERQ, Dembo-Rubinstein self-assessment scales. The study was conducted from 04/25/2020 to 05/31/2020.