

desire to eat sweets in two cycles, before and during the intervention, was recorded by the students. The data were analyzed using descriptive and inferential statistics.

Results The comparison of vitamin B1 group before and after the intervention showed that vitamin B1 reduced mean mental (35.08%) symptoms significantly ($P < 0.0001$). The reduction of severity was observed in desire to eat sweets was 2.42%. The average of mental symptoms severity of PMS has been reduced in vitamin B1 group, and the comparison was significantly different.

Conclusions Therefore, vitamin B1 is recommended for reduction of symptom severity of PMS include desire to eat sweet. This vitamin can be used to reach a major goal of midwifery, without any side effects.

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EV1505

“Hear me out”: Experiences of mothers suffering from severe mental illness with health care providers – A qualitative perspective

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Background Contrary to popular myth, majority of mentally ill women are mothers with increasing number of them seeking help. Little is known about their own experiences in this regard and the extent to which their needs are met.

Objectives To assess the barriers and facilitators in seeking help from mental health care providers in matters of pregnancy and parenting.

Methods The study used qualitative design with social constructivist paradigm. A purposive sample of 30 mothers with severe mental illness was obtained. Data was collected through one-to-one in-depth semi-structured interviews. After verbatim transcription, inductive thematic analysis was used to explore transcripts.

Results Most women considered motherhood “central” to their lives and almost all of them experienced the burden of the “dual role”. Main barriers in seeking help were stigma, treatment side effects, wrong information and time constraints. Whereas self-advocacy, early engagement, education of women and involvement of the family with service providers were the facilitating factors. The prime expectations of the mothers as identified were early and direct communication, patient audience and basic guidance in regards to child health and parenting issues.

Conclusion Women who are mothers and also users of mental health services face special challenges in managing the contradictory aspects of their dual identity. Hearing their voices are essential for service provision and ensuring adequate mental health needs. Early and direct intervention along with understanding and addressing critical areas are necessary for proper care of both the mother and child.

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EV1506

Correlation between self-efficacy and well-being, and distress, in women with unexplained infertility

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Introduction One of the most difficult aspects of unexplained infertility treatments are feelings of uncertainty and the perception that infertility is beyond one's personal control, both of which make the infertility situation more threatening and stressful.

Objectives The aim of this study was to explore the correlation between general self-efficacy and infertility specific well-being and distress among women with unexplained infertility.

Methods The sample consisted of 97 women with unexplained infertility aged between 22 and 46 years old (mean age: 33.58), who were recruited from the obstetrics and gynecology clinic “National front”. Mean duration of conception attempts was 3.10 years. The General Self-Efficacy Scale and the Infertility Specific Well-Being and Distress Scales were applied in the study.

Results The mean score on the General Self-Efficacy Scale was 32.77 (SD = 4.624), on the Well-Being scale 3.22 (SD = 0.984) and on the Distress scale 1.94 (SD = 0.754). There was a positive correlation between intensity of infertility specific well-being and general self-efficacy ($r = 0.502$; $P < 0.01$) and a negative correlation between infertility specific distress and general self-efficacy ($r = -0.265$; $P < 0.01$). Women with unexplained infertility with higher self-efficacy expressed higher levels of well-being and lower levels of distress.

Conclusion The results of our study indicate that women with unexplained infertility who perceive their problems as being beyond their control express higher levels of stress and lower levels of well-being. Psychological treatment of women with unexplained infertility should focus on the aspects that can be influenced through psychotherapy.

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EV1507

Women with hysterical manifestations: Menopause, gender and mental health

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Introduction Aging and menopause as a medico-social determinant of female gender influence on mental health. Female gender in the period of menopause is associated with the end of fertility that affects adaptation to changed conditions, decreases intellectual and physical possibilities, narrows role positions, leads to non-psychotic mental disorders (NPMD).

Objective To identify influence of the age, menopause, female sex, sociodemographic parameters on hysterical symptoms in structure of NPMD.

Material In the borderline states department, 93 female patients with hysterical manifestations in structure of NPMD were treated. **Methods** Psychopathological, clinical-dynamic, clinical-catamnestic, psychometric, psychological and statistical.

Results In 100%, the hysterical symptoms in the puberty leveled at reproductive age, intensified in climax: 72.04% - pre-menopause ($P < 0.05$), meno-, postmenopause - 13.98% each. Sociodemographic characteristics (marital status, social status, place of living, education, family composition, family relations) were not interrelated

with frequency of hysterical manifestations in the structure of NPMD ($P > 0.05$). There were more married (68.82%) than divorced (15.05%), widowed (10.75%), single (5.38%); more working (70.97%) than pensioners (22.58%), unemployed (6.45%); more living with husband (51.61%) than with husband and children (17.21%), living alone (15.05%), with adult children (16.13%); more townswomen (80.65%) than villagers (19.35%); education more often secondary (51.61%), high (45.16%) than elementary (3.23%); disharmonic family relations more often (70.97%) than harmonic (13.98%), indifferent (15.05%).

Conclusions Age, menopause, female sex are reliably ($P < 0.05$) connected with intensification of hysterical symptoms in the structure of NPMD in difference from sociodemographic parameters not associated with frequency of hysterical manifestations.

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EV1508

World maternal mental health day

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Introduction As many as 20% of mothers experiences some type of perinatal mood and anxiety disorder (PMAD) worldwide. Women of every culture, age, income level, and race are at risk for PMADs with potential effects to mother and child.

Objectives To promote awareness of maternal mental health and PMADs.

Method An international task force met via online videoconference to make plans for the inaugural World Maternal Mental Health Day. The task force soon grew to include representatives from around the globe with a common goal to increase awareness of and influence policy about maternal mental health. This presentation will discuss the process, successes, challenges, and engage participants in future social marketing strategies for World Maternal Mental Health Day. International reach and impact will be discussed.

Result Organizations from 12 countries were involved in this event, with twitter and landing page activity across the globe. A unique logo was developed and numerous organizations endorsed the event. An international social media campaign included a Twitter Feed “#Maternal Mental Health Matters” starting in Australia, Facebook page, and landing page. The first World MMH Day was held May 4, 2016.

Conclusion Increased awareness will continue to drive social change with a goal of improving the quality of care for women worldwide who experience all types of PMADs and to reduce the stigma of maternal mental illness. World Maternal Mental Health Day will be held each year on the first Wednesday of May, close to “mother’s day” and “mental health week” in many countries.

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EV1509

Evaluation of capacity to love, depression, and anxiety in women according to their relationship status

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Introduction Associations between psychiatric disorders and relationship status as well as the impact of psychiatric symptoms on the quality of romantic relationships have already been demonstrated but the association between psychiatric symptoms and the capacity to maintain romantic relationships has been rarely examined.

Aim To investigate anxiety, depressive symptoms and capacity to love (CTL) in single women (sw) and those in a relationship (rw).

Methods Two hundred healthy adult females (100 sw, 100 rw; mean age 27.8 ± 8.1 yrs and 27.3 ± 8.1 yrs, respectively) completed the PHQ-4 and the CTL-Inventory. Differences in anxiety and depressive symptoms and CTL between both groups were assessed by independent-samples *t*-tests. Moreover, correlations between CTL, anxiety and depressive symptoms in each group were investigated.

Results Sw showed a significantly higher level of depressive symptoms (mean_{sw} \pm SD_{sw} 1.59 ± 1.66 , mean_{rw} \pm SD_{rw} 1.07 ± 1.37 , $P = 0.016$) and a significantly lower CTL (mean_{sw} \pm SD_{sw} 126.81 ± 12.60 ; mean_{rw} \pm SD_{rw} 137.13 ± 11.26 , $P \leq 0.001$) than rw but no differences occurred for anxiety symptoms.

Among sw, CTL negatively correlated with depressive ($r = -0.37$, $P < 0.001$) and anxiety symptoms ($r = -0.44$, $P < 0.001$) whereas in rw, a negative correlation occurred only between CTL and depressive symptoms ($r = -0.43$, $P < 0.001$).

Conclusion Our results suggest that single women, compared to women in a relationship, show a lower CTL and suffer more from depressive symptoms.

Furthermore, a lower CTL is associated with more anxiety and depressive symptoms, thus suggesting that future therapeutic approaches to depression and anxiety should also take into account relationship conflicts and CTL. As a crucial personality trait, CTL might be an important moderator of coping with common psychiatric symptoms.

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EV1510

Particularities in immigration amongst homeless women in Girona

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Introduction Homelessness is a problem which affects all the areas of those who suffer it, affecting their health seriously. These risks increase when the affected person has carried out a migratory process. Another risk factor, apart from immigration, is to be woman.

Objectives To analyse the gender demographic differences in a total cohort of homeless people in the city of Girona in 2006 and continued until the present day.

Methods Prospective longitudinal study of the total population of homeless people in Girona. In 2006, a list was made of all the homeless people detected by both specialized and non-specialized teams which have been followed until the present day.

Results The total number of women in the sample is lower ($n = 106$, 11.2%). There are fewer immigrant than autochthonous women ($\text{Chi}^2 = 23.1$, $\text{df} = 1$, $P < 0.001$).

After following the total homeless population in 2006, we can confirm that currently we can still identify 62 people in the territory (6.7%). In this subsample there are no differences between genders (man: $n = 54$, 6.5% vs. woman: $n = 8$, 7.5%; $\text{Chi}^2 = 0.21$, $\text{df} = 2$, $P = 0.89$). That is, men and women remain in their homeless condition in a proportional way. This fact presents great limitations, since we do not know what happened with the other 93% of the initial sample.