

Institute for Health and Care Research (NIHR) provided funding for research to address policy questions, for example what support may be most relevant to FMs during their patients' treatment. The study presented here was funded as part of this initiative and has explored what support FMs wish to receive.

Objectives: To explore FMs' experiences and views around support they would have liked during their patients' involuntary hospitalisation and wider stakeholder views on what a family support programme in England should involve. This information can be used to develop a support programme for FMs.

Methods: One-to-one interviews were conducted online as part of two work packages. The first work package explored FMs' experiences and views of support. The second work package explored views on what should be included in a family support programme in England from FMs, patients and professionals. Interviews took place at three sites across England. Audio recordings of the interviews were transcribed, and data were analysed using thematic analysis.

Results: 22 FMs were recruited to the first work package, where four key themes were identified: (1) heterogeneity in the current support for families; (2) information about mental health and mental health services; (3) continuous support; and (4) peer support and guidance. FMs reported receiving support from professionals, peers and relatives, but the extent of this support varied. FMs consistently reported wanting a named contact to provide information and personal continuity of support. 5 FMs, 4 patients and 10 professionals took part in the second work package, where four main themes were also identified: (1) development of a support programme; (2) delivery of a support programme; (3) factors limiting accessibility or engagement; and (4) benefits of a support programme. Information about the MHA and strategies to promote effective communication between FMs and professionals were identified as important to include in the programme and its delivery should include a combination of face-to-face, written and online methods. Potential benefits of the programme include improved FM knowledge and wellbeing.

Conclusions: FMs of involuntarily hospitalised patients should receive information around the MHA and strategies to promote effective communication with professionals. FMs should also be allocated a named contact person to offer information and personal continuity of support through various methods, for example through online, face-to-face or written contact.

Disclosure of Interest: None Declared

EPP0408

Palestine-Israel War Coping Strategies of Tunisian People

N. Messedi¹, F. Guermazzi¹, A. Samet¹, I. Chaari¹, M. Sehli^{1*}, F. Charfeddine¹, L. Aribi¹ and J. Aloulou¹

¹Psychiatry B, Hedi Chaker University Hospital, Sfax, Tunisia

*Corresponding author.

doi: 10.1192/j.eurpsy.2024.565

Introduction: The war in Gaza is a stressful life event. Due to its significant human and financial losses, it affected the mental health of people around the world including the middle east citizens.

Objectives: To study the coping strategies of Tunisian people toward Palestine-Israel war in its first month and the factors associated with them.

Methods: It was a cross-sectional, descriptive and analytical study, conducted among Tunisians. Data were collected during October and November 2023, through an anonymous online questionnaire, spread throughout social media (Facebook/Instagram), using the Google Forms® platform. We used a socio-demographic and clinical data sheet and the "Brief-COPE" to assess coping strategies.

Results: A total of 1091 participants completed the questionnaire. Their mean age was 32,7± 9.8 years, with a sex-ratio (F/M) of 3.5. Among participants, 46,1% are married, 42,5% have children and 19,5% have a psychiatric follow history. Sport's practitioners represent 23,3% of the participants and 10,6% increased their use of sports after the war news.

In terms of coping strategies: problem focused coping was the most used strategy (mean= 2,02) followed by emotional focused coping (mean= 1,98) and avoidant coping (mean= 1,63). Tunisians rely the most on religion, accepting reality and planning as coping mechanisms (score= 2,85; 2,4 and 2,23 respectively). Substance use was the last resort option (score= 1,11).

Our survey revealed significant associations between coping mechanisms and several factors: Venting, humor and behavioral disengagement were significantly correlated with sex gender (p=0,000 ; 0,000 ; 0,000 respectively); Substance use coping mechanism was significantly correlated with participants having a psychiatric follow history (p=0,001); Avoidant coping subscale was significantly correlated with having children (p=0,000); Self distraction was significantly correlated with the increase use of sport among Tunisians (p=0,000).

Conclusions: These findings underscore the need for healthcare and productive coping strategies for Tunisians and middle east people during the Palestine-Israel war.

Disclosure of Interest: None Declared

EPP0409

Enhancing Postpartum Mental Health: Evaluation of the Effect of Remote Peer Support Intervention

H. Němcová^{1,2*}, K. Hrdličková^{1,2}, M. Kuklová^{1,3,4}, A. Horáková^{1,5}, E. Nosková^{1,6}, P. Švancer^{1,6}, N. Byatt⁷ and A. Šebela^{1,6}

¹National Institute of Mental Health, Klecany; ²Faculty of Arts, Department of Psychology; ³Faculty of Science, Department of Demography and Geodemography; ⁴Second Faculty of Medicine; ⁵First Faculty of Medicine; ⁶Third Faculty of Medicine, Charles University, Prague, Czech Republic and ⁷Department of Psychiatry, UMass Chan Medical School and UMass Memorial Health, Worcester, United States

*Corresponding author.

doi: 10.1192/j.eurpsy.2024.566

Introduction: The postpartum period poses a risk of both onset and relapse of mental health disorders in mothers, which can impact maternal-child relationships and development of children. Timely intervention is crucial, especially considering that majority of at-risk women do not seek professional help.