

to date, including evolving local and national policies that have been developed to allow medical assistance in dying in certain circumstances. We will also review work of the Canadian psychiatric association task force on medical assistance in dying (presented by the Task Force Chair), with a focus on challenges and issues relevant to mental health and mental illness.

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Beyond the crisis: Ongoing psychiatric treatment and service utilization after initial symptom stabilization following first-episode psychosis for adolescents

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Introduction The importance of timely identification and treatment of psychosis are increasingly the focus of early interventions, with research targeting the initial high-risk period in the months following first-episode hospitalization. However, ongoing psychiatric treatment and service utilization after the symptoms have been stabilized over the initial years following first-episode has received less research attention.

Objectives To model the variables predicting continued service utilization with psychiatrists for adolescents following their first-episode psychosis; examine associated temporal patterns in continued psychiatric service utilization.

Methods This study utilized a cohort design to assess adolescents (age 14.4 ± 2.5 years) discharged following their index hospitalization for first-episode psychosis. Bivariate analyses were conducted on predictor variables associated with psychiatric service utilization. All significant predictor variables were included in a logistic regression model.

Results Variables that were significantly associated with psychiatric service utilization included: diagnosis with a schizophrenia spectrum disorder rather than major mood disorder with psychotic features (OR = 24.0; $P = 0.02$), a first degree relative with depression (OR = 0.12; $P = 0.05$), and months since last psychiatric inpatient discharge (OR = 0.92; $P = 0.02$). Further examination of time since last hospitalization found that all adolescents continued service utilization up to 18 months post-discharge.

Conclusions Key findings highlight the importance of early diagnosis, that a first degree relative with depression may negatively influence the adolescent's ongoing service utilization, and that 18 months post-discharge may a critical time to review current treatment strategies and collaborate with youth and families to ensure that services continue to meet their needs.

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Opinions of professionals and family members about the National mental health law regulating involuntary commitment of psychiatric patients: An international comparative study in 10 countries

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Introduction Previous research illustrated that the laws regulating involuntary placement and treatment of persons with mental health problems are very diverse across countries; procedures for involuntary commitment and stakeholders involved in the initiation and decision making vary across countries; most laws include criteria of danger/risk, which take various forms in EU Member States' legal frameworks, while the need for treatment in the best interests of the patient is sufficient to detain individuals in other countries, etc.

Objectives This study will compare the opinions of professionals and family members about the operation of the National mental health law regulating forcibly admission and treatment of psychiatric patients in ten countries: Ireland, Iceland, UK, Romania, Slovenia, Denmark, Sweden, Germany, Norway and India.

Aims To gain insights into stakeholders' satisfaction with the operation of their national legislation and to compare the effectiveness and acceptability of different legislative processes across countries. Such scientific findings are needed in order to improve and harmonize legal practices, and to enhance fundamental rights protection of persons with mental health problems, which eventually could result in a lower rate of compulsory admissions.

Methods A short anonymous questionnaire consisting of 9 items was developed, using the online software Survey Monkey. It was distributed to representative samples via e-mail to psychiatrists, general practitioners, acute and community mental health nurses, tribunal members, guards and family members in each collaborating country. The levels of agreement/disagreement were measured on a Likert- scale.

Results/Conclusions The study's results and conclusions will be presented at the conference.

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PALOMA project – developing National mental health policies for refugees

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Introduction Earlier researches have established that migrants with refugee background have increased risk for variety of mental health problems due to often traumatic reasons for leaving their home country, hazardous journey and post-migration adversity. The challenge is that mental health work with refugees is not systematically organized in Finland. PALOMA (developing National mental health policies for refugees 2016-2018) project was launched to answer these challenges. The project is carried out through the combined effort of National institute for health and welfare, The Finnish association for mental health, Helsinki and Kuopio university hospitals, and the municipality of Hämeenlinna. PALOMA