

Conclusions: In the French ELFE cohort, early centre-based childcare was linked to lower likelihood of having internalising problems in children at age 5.5 years. Further studies should focus on the possible mechanisms of this association. Family and childhood policies should aim to make centre-based childcare accessible to more children.

Disclosure of Interest: None Declared

EPV0145

Assessment of social skills of adolescents victims of mistreatment

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Introduction: Between January and May 2022, more than 78,248 complaints were registered in Brazil, involving children and adolescents in situations of abuse. (Ministry of Women, Family and Human Rights, 2022). Childhood maltreatment includes all forms of physical, emotional, sexual abuse or neglect. Literature has shown that individuals who are victims of abuse have more difficulties with social skills than their peers.

Objectives: Quantitatively evaluate the social skills of adolescent victims of abuse.

Methods: Six adolescents between 12 and 17 years old participated in the study. The assessment of social communication skills was performed using the Social Skills Rating Scale (SSRS) protocol. At the time of data analysis, the following variables were taken into account: gender of the participants and type of abuse suffered, as stated in their medical records.

Results: Male participants showed a better overall performance in social skills than female participants. However, this second group scored higher on assertiveness and empathy skills. Regarding the type of abuse, in both genders, victims of sexual abuse and neglect showed better results than those who suffered only neglect. The results are described in more detail in images 1 and 2.

Table 1. Female group results

	Overall score SSRS	Empathy	Self-control	Responsibility	Assertiveness
Expected scores	25 – 32	7 – 9,81	6 -10	7 - 10	3 – 5
Average of the results obtained (n = 3)	19,66	5,66	5,66	5,66	2,66
Average of the results obtained from neglect victims (n = 2)	17	4	5	4,5	3,5
Average of the results obtained from sexual abuse and neglect victims (n = 1)	25	9	7	8	1

Table 2. Male group results

	Overall score SSRS	Empathy	Self-control	Responsibility	Assertiveness
Expected scores	23 – 31	6 – 9	6 - 9	7 – 9	2 - 5
Average of the results obtained (n = 3)	23,66	4,66	7,66	8,66	1,33
Average of the results obtained from neglect victims (n = 1)	25	3	10	8	2
Average of the results obtained from sexual abuse and neglect victims (n = 2)	23	5,5	8	7,5	2

Conclusions: Adolescents who are victims of abuse have considerable difficulties with social skills, which can impact the performance of their basic day-to-day activities. More studies about the impacts of mistreatments on the development of social skills are needed.

Disclosure of Interest: None Declared

EPV0146

Boredom, emotional dysregulation and avoidance coping strategies: Which is their role in youth mood disorders?

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Introduction: Coping and emotional regulation mechanisms may play a significant role in the neurodevelopment and in the subsequent psychopathological trajectories, especially in youth. The boredom dimension may also have a pathoplastic role.

Objectives: Considering the poor literature in adolescents and young people (15-24 years-old), our study aims at investigating the relationships between coping patterns and emotional dysregulation as well the mediatory role of boredom, by particularly focussing on a sample at early onset of mood disorders.

Methods: Cross-sectional, observational design study. Descriptive analyses were performed considering a set of socio-demographic and clinical variables (DERS, MSBS, COPE-NVI). Kruskal-Wallis, Spearman correlations and linear regression models were performed between DERS (dependent variable) and COPE-NVI (independent variable), together with mediation analyses (MSBS as mediator).

Results: 86 subjects (mean age=18.4±2.8) were enrolled. DERS score was 114.8±33.3, COPE-NVI was 129.1±22.1, MSBS was 136.22±45.8. Positive correlation between DERS total and *avoidance strategies* ($r=+0.6, p<0.001$) and negative correlation between DERS total and *problem orientation strategies* ($r=-0.467, p=0.023$)

were found. Linear regression analyses showed statistically significant differences between DERS and COPE-NVI *avoidance strategies* ($p < 0.001$) and COPE-NVI *problem orientation* ($p < 0.023$). Mediation analyses confirmed the mediatory role of boredom dimension in the association between COPE-NVI *avoidance* subscale and DERS total ($B = 0.6849$, $p < 0.001$), between *avoidance* subscale and DERS *lack of acceptance* subscale ($B = 0.1286$, $p < 0.001$). Moreover, a mediatory role of MSBS inattention subscale was found in the association between COPE-NVI *avoidance* subscale and DERS *lack of control* subscale ($B = 0.1027$, $p < 0.001$).

Conclusions: Maladaptive coping strategies (particularly avoidance) were associated with increased DERS levels. A predominant use of more adaptive coping strategies (i.e., problem solving, planning) were associated with lower DERS levels. Their relationship appears to be mediated by boredom dimension.

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EPV0147

The effect of maternal pre-pregnancy body mass index and gestational weight gain on behavioural outcomes in term normal birth weight children: UK birth cohort study

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Introduction: Existing evidence in the association between maternal pregnancy and pre-pregnancy weight and behavioural outcomes in children.

Objectives: This study aimed to examine these associations at six developmental time-points between ages 3 and 16.

Methods: We used data from the Avon Longitudinal Study of Parents and Children (ALSPAC), an ongoing population-based longitudinal pregnancy cohort study in Bristol, United Kingdom (UK). Data on behavioural outcomes were measured at ages 3.5, 7, 9, 11 and 16 years using the Strengths and Difficulties Questionnaire (SDQ). Over 7960 (at 3.5 years of age) and 4400 (at 16 years of age) mother-child pairs were included in the final analysis. Logistic regression analyses were used to examine the associations.

Results: Pre-pregnancy BMI and gestational weight gain were associated with total behavioural difficulties in children across all age groups. In separate analyses using each SDQ subscale, however, we found that pre-pregnancy underweight was associated with emotional problems at ages 7 (OR = 1.66, 95% CI; 1.20 – 2.29), 11 (OR = 1.49, 95% CI; 1.02 – 2.18) and 16 (OR = 1.74, 95% CI; 1.16 – 2.60) years and hyperactivity/inattention problems at age 16 (OR = 1.96, 95% CI; 1.27 – 3.05). We also found an association between guideline-discordant gestational weight gain and peer relationship problems at age 9 and pro-social behaviour at ages 9 and 11.

Conclusions: Our findings highlight that pre-pregnancy underweight than overweight, obesity or gestational weight gain may influence the emotional health of children and adolescents.

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EPV0148

Adolescents' quality of life in the light of mentalization and emotion regulation

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Introduction: According to research there is a negative association between emotion regulation, mentalization difficulties and quality of life among adolescents, but former research did not examine the relationship between these 3 constructs in a Hungarian adolescent sample.

Objectives: The aim of our study was to examine the relationship between mentalization and emotion regulation with quality of life among 14- to 18-year-old adolescents.

Methods: In our non-clinical, cross-sectional study 122 adolescents with informed consent answered a list of demographic questions, then completed the Reflective Function Questionnaire (RFQ-H), the Emotion Regulation Difficulties Questionnaire (DERS) and the Quality of Life Scale (ILK). In our mediator model we chose RFQ-H as the independent, DERS as the mediator and ILK as the dependent variable.

Results: The first model was significant ($F(1,120) = 28,79$, $p < 0,001$, $R^2 = 0,19$), there was a significant relationship between mentalization disfunction and emotional regulation difficulties ($a = 0,39$, $p < 0,01$, $\beta = 0,44$). The second model was significant as well ($F(2,119) = 30,48$, $p < 0,001$, $R^2 = 0,34$), though the direct effect between mentalization difficulties and low quality of life was not significant ($c' = 0,02$, $p = 0,73$, $\beta = 0,03$), the direct effect between emotion regulation difficulties and low quality of life was significant ($b = 0,58$, $p < 0,01$, $\beta = 0,57$). The indirect effect between mentalization disfunction and low quality of life mediated by emotional regulation difficulties was also significant $ab = 0,22$ [0,13 – 0,33], $\beta = 0,25$ [0,14 – 0,36]).

Conclusions: Our results - taking the limitations into account - imply that emotional regulation mediates the relationship between mentalization and quality of life among the present-day, non-clinical, Hungarian adolescent sample, which could have practical implications.

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EPV0149

Does mentalizing moderate the relationship between psychopathology and quality of life?

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