

## EPV1107

### Fear of childbirth in a sample of Tunisian women: factors related to pregnancy

M. Abdelkefi<sup>1\*</sup>, R. Feki<sup>1</sup>, R. Walha<sup>2</sup>, W. Zid<sup>2</sup>, I. Gassara<sup>1</sup>, N. Smaoui<sup>1</sup>, S. Omri<sup>1</sup>, N. Charfi<sup>1</sup>, L. Zouari<sup>1</sup>, J. Ben thabet<sup>1</sup>, K. Chaabene<sup>2</sup>, M. Maalej bouali<sup>1</sup> and M. Maalej<sup>1</sup>

<sup>1</sup>Psychiatry C department and <sup>2</sup>Gynecology-Obstetrics department, Hedi Chaker university hospital, sfax, Tunisia

\*Corresponding author.

doi: 10.1192/j.eurpsy.2024.1675

**Introduction:** Fear of childbirth is attracting growing interest because of its impact on the experience of pregnancy and on the progress of childbirth and it seems that some women are more susceptible to fear of childbirth than others are.

**Objectives:** Our objective is to identify pregnancy factors that predict the fear of childbirth.

**Methods:** We approached 350 pregnant women consulting at the Gynecology-Obstetrics department of the Hedi Chaker University Hospital of Sfax. We collected their sociodemographic and clinical data. Fear of childbirth was assessed using the French version of the Traumatic Event Scale (TES), adapted to assess fear of childbirth.

**Results:** The mean age of the participants was 28 years (16-41) and the mean gestational week was 36.27. Half of the participants (53.7%) were nulliparous, and eight reported a history of infertility. The pregnancy was not planned in 61% of cases. As many as 67% of the participants had regular checkups, 50.3% had exaggerated somatic symptoms and 34.3% had pregnancy-related diseases.

The mean score for the TES was  $48.73 \pm 13.72$ .

We found a positive correlation between the TES score and nulliparity ( $p=0.01$ ), gestational age  $\geq 40$  weeks ( $p=0.01$ ), planned pregnancy ( $p=0.002$ ), exaggerated somatic symptoms ( $p=0.03$ ), and pregnancy-related diseases ( $p<0.001$ ).

**Conclusions:** Identification of women at risk for fear of childbirth could help in preparing them before or during pregnancy to improve their childbirth experiences.

**Disclosure of Interest:** None Declared

## EPV1108

### What link between violence against women and self-esteem?

M. Abdelkefi\*, R. Feki, A. Turki, I. Gassara, N. Smaoui, S. Omri, N. Charfi, L. Zouari, J. Ben thabet, M. Maalej bouali and M. Maalej  
Psychiatry C department, Hedi Chaker university hospital, sfax, Tunisia

\*Corresponding author.

doi: 10.1192/j.eurpsy.2024.1676

**Introduction:** Violence against women is a public health problem worldwide and a violation of human rights. It affects women's lives due to its potential short-, medium- or long-term physical and psychological consequences.

**Objectives:** The aim of our study is to explore the link between violence against women and self-esteem.

**Methods:** A descriptive cross-sectional study was conducted from March to August 2023 among Tunisian women consulting in three health care centers in Sfax, Tunisia. We have included women victims of violence (psychological, physical, sexual, and economic). We have used a semi-structured interview and the Rosenberg scale to determine the quality of self-esteem.

**Results:** Among one hundred interviewed women, fifty-four women who had reported being violence victims were included in our study. The mean age of the participants was 44 years with the majority being married (87%). Only 29.6% had a high school level and 51.9% had a profession. A total of 29.6% had a low socio-economic status.

We found that 79.6% are victims of domestic violence (57.4% being victims of spousal violence). Psychological violence seemed to be the most frequent type (59.3%).

Almost all those who were abused (90.6%) experienced psychological (emotional) violence.

The mean score of the Rosenberg self-esteem scale was 31.54.

Self-esteem was very low in 16.7%, low in 37%, medium in 18.5%, and high in 27.8% of the women.

A statistically significant association was found between being a victim of spousal violence and low self-esteem ( $p=0.032$ ). The semi-structured interview demonstrates that women with low self-esteem are more likely to accept violence.

**Conclusions:** These results justify the implementation of screening and support programs for women victims of violence to improve their self-esteem.

**Disclosure of Interest:** None Declared

## EPV1109

### Association between Educational Attainment and Risk of Postnatal Depression: Findings from the Czech Republic

M. Kuklová<sup>1,2,3\*</sup>, K. Hrdličková<sup>1</sup>, A. Horáková<sup>1</sup>, H. Němcová<sup>1</sup> and A. Šebela<sup>1</sup>

<sup>1</sup>Centre of Perinatal Mental Health, National Institute of Mental Health, Klecany; <sup>2</sup>Department of Epidemiology and <sup>3</sup>Department of Demography and Geodemography, Charles University, Prague, Czech Republic

\*Corresponding author.

doi: 10.1192/j.eurpsy.2024.1677

**Introduction:** Postnatal depression is a common mental health condition that affects women across the globe. Lower education is frequently considered to be linked to an increased likelihood of postpartum depression. Nevertheless, inconsistent epidemiological evidence has been reported concerning the associations between education and postpartum depression risk. This study investigates the correlation between education level and postpartum depression in the Czech Republic.

**Objectives:** The aim of this study was to examine whether there is an association between educational attainment and the risk of postnatal depression in women who have recently given birth in the Czech Republic.

**Methods:** Women aged 18-45, who spoke Czech and had an email address, and had given birth in the hospital were eligible to participate in the study. The research was conducted in the maternity

unit, where a medical professional presented the opportunity to take part. All participants were screened using the Edinburgh Postnatal Depression Scale (EPDS), with the cut-off score of  $\geq 10$  showing increased of postpartum depression.

Education data was collected via self-reported questionnaires. Binary logistic regression was employed to calculate the odds ratio (OR) with 95% confidence intervals (CI) to assess the relationship between educational attainment and postpartum depression risk, with sociodemographic and health-related characteristics being stepwise adjusted.

**Results:** Our study consisted of 3,739 postpartum respondents (mean age of 31 years). The prevalence of increased postpartum depression ( $\geq 10$  EPDS points) was 22.7%. Compared to individuals with higher education (reference category), those with basic education had a higher risk of postpartum depression (OR 1.67; 95% CI 1.26–2.23;  $p < 0.001$ ), even after adjusting for all covariates (OR 1.55; 95% CI 1.08–2.22;  $p = 0.017$ ). Basic education was found to have the strongest association with an increased risk of postpartum depression, even when adjusted for covariates. The association between education and postpartum depression was explained by the covariates.

**Conclusions:** Having only basic education is a significant risk factor for postpartum depression. Interventions to reduce the burden of postpartum depression ought to focus on individuals with low levels of education.

**Disclosure of Interest:** None Declared

## EPV1111

### An educational program, «Women victims of domestic violence: Detection, clinic, help»: Working with the complexity of teaching and Interpreting practice through research

N. D. Semenova<sup>1\*</sup>, M. A. Kachaeva<sup>2</sup> and S. V. Shport<sup>3</sup>

<sup>1</sup>Laboratory of Psychological Counseling, Moscow Research Institute of Psychiatry – a branch of V. Serbsky National Medical Research Centre for Psychiatry and Narcology; <sup>2</sup>Department of forensic psychiatric examination and <sup>3</sup>Administration, V. Serbsky National Medical Research Centre for Psychiatry and Narcology, Moscow, Russian Federation

\*Corresponding author.

doi: 10.1192/j.eurpsy.2024.1678

**Introduction:** Firstly, we will speak on the violence against women from a Russian perspective. The selected reports from regional psychiatric services and police department reports of domestic violence cases will be presented.

**Objectives:** Secondly, we will draw upon our work developing and providing a new educational program, «Women victims of domestic violence: Detection, clinic, help,» mainly based on teaching several modules, WPA International Curriculum for Mental Healthcare Providers on Violence Against Women.

**Methods:** In this present paper, we examine evidence-based practice from the starting points of research as illumination and psychiatry as a discipline with hermeneutic potential, to consider relationships between research and practice and the opportunities

available within the current research agenda for psychiatrists and clinical psychologists working in clinical settings.

**Results:** We contend that the quality of women's mental health services will only improve when they can acknowledge the considerable impact that intimate partner violence and sexual violence, as well as social inequalities, especially those based on gender, have on women's mental health. We do not underestimate the difficulty of providing practical help to women whose mental health has been profoundly affected by the violence, damage that is often further compounded by years of mistreatment and revictimization in services.

**Conclusions:** The paper provides commentaries and reflections on the steps that must be taken to create opportunities to foster dialogue, discussing and exchanging ideas on a diverse range of topics relevant to the advancement of the program in the broader context.

**Disclosure of Interest:** None Declared

## EPV1112

### Differences in the perception of stigma in schizophrenia between men and women: a brief qualitative approach

P. Andres-Olivera<sup>1,2,3\*</sup>, B. Arribas-Simon<sup>4</sup>, E. D. Alvarez<sup>1</sup>, B. Bote<sup>1,2</sup>, C. Martin-Gomez<sup>1,2,3</sup>, C. Payo<sup>1</sup>, C. Munaiz<sup>1</sup>, R. Brito<sup>1</sup> and M. Ligerio-Argudo<sup>1</sup>

<sup>1</sup>Psychiatric Service, University of Salamanca Health Complex;

<sup>2</sup>Psychiatric Unit. School of Medicine, University of Salamanca;

<sup>3</sup>PRINT, Biomedical Research Institute (IBSAL), Salamanca and

<sup>4</sup>Psychiatric Service, University of Valladolid Healthcare Complex, Valladolid, Spain

\*Corresponding author.

doi: 10.1192/j.eurpsy.2024.1679

**Introduction:** Men and women with psychosis have different courses and presentations of symptoms. Men with psychosis have an earlier onset of illness, more negative symptoms, and worse premorbid functioning. Women, on the other hand, have better social functioning and less substance abuse. Despite these evident differences, there are few studies that delve into these distinctions, especially from a subjective perspective.

**Objectives:** The aim of this study is to understand the differences in the perception of psychosis between men and women.

**Methods:** Five women and five men diagnosed with schizophrenia participated in the study. They were matched so that the age difference between them was no more than 5 years, with ages ranging from 40 to 56 years. Participants had not experienced acute decompensation of their underlying illness and had not required admission to an Acute Care Unit in the 6 months prior to inclusion in the study. Data collection was conducted through the Spanish translation of the Indiana Psychiatric Illness Interview, consisting of five parts: a narrative about their life, a narrative about the illness, questions related to how the illness has changed their life and what has not changed, the overall influence of the illness on their life, and lastly, expectations for the future.