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but this study does suggest that the implementation of CTOs is a cost-effective intervention and is economically advantageous to the local Trust.

Preconception interventions and resources for women with serious mental illness: a rapid evidence review

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Aims. There is little research into evidence-based preconception interventions for women with serious mental illness (SMI). Women with SMI will have specific needs around preconception due to the complexities of the teratogenicity of medications, risk of mental illness relapse and higher levels of stigma around motherhood. If effectively delivered preconception care could mitigate these difficulties and improve outcomes for mother and baby. The aim of this research was therefore to determine to identify and describe studies evaluating preconception interventions for women of child-bearing age who have an existing SMI through searches of the peer-reviewed literature.

Method. A rapid review was conducted to search MEDLINE and PsychINFO databases from the year 2000 onwards for peer-reviewed articles describing preconception interventions/ resources delivered prior to a pregnancy to women of child-bearing age with a pre-existing existing serious mental illness (including schizophrenia, bipolar and eating disorders).

Result. A total of 592 results were returned from the searches and 576 of these remained after the removal of duplicates. 11 studies were included in the final narrative synthesis describing the following intervention types: Health warning (1), Health screening (1), Teratogen phone service (2), Psychiatric consultation (5), Family planning information (1) and Peripartum management plan (1). Interventions were delivered in Australia, UK, Italy, Germany, Netherlands, USA and Nigeria.

Conclusion. Though the included studies indicated that some efforts have been made globally to meet the preconception needs of women with SMI the numbers included in the studies tended to be low and reflective of small-scale service provision. Future studies utilising a randomised controlled trial design would lower the risk of bias and provide more generalisable evidence of effectiveness for these interventions. The results of this review were used to inform the development of a number of resources to aid the planning of healthy pregnancies in both women with SMI and the health professionals working with them.

Relationship between bullying victimisation and post-traumatic stress disorder among public junior secondary school students in Abeokuta, Nigeria

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Aims. To determine the relationship between bullying victimization and PTSD among students attending public Junior Secondary Schools in Abeokuta. The Prevalence of Bullying victimization and PTSD as well as some socio-demographic correlates were also assessed.

Method. About 411 junior students from five randomly selected public secondary schools were approached for the study and given consent forms to take home to their parents/guardians. Those who subsequently returned signed consent forms and who gave assent to participate in the study were administered the Socio-demographic questionnaire and the Multidimensional Peer Victimisation Scale (MDPVS). They were thereafter interviewed with the PTSD module of the MINI KID.

Result. A total of 351 students completed the study to yield a response rate of 85.4%. The age range of the respondents was 9-17 years with mean (SD) of 12.48 (1.50) years. The gender distribution was 49.3% males and 50.7% females. 68.7% of the respondents were from a monogamous home, 22.2% had divorced parents, 74.3% lived with both parents, and 6% reported being an only child. 14.8% of the respondents reported having experienced higher levels (moderate & high) of victimization by peers. The mean score of the overall bullying victimization level was 9.6 (±6.5). Verbal victimization subscale had the highest mean score of 3.2 (±2.0), while physical victimization had the lowest mean of 1.9 (±2.1). Seventy (19.9%) students admitted to the experience of a significant traumatic event, with only 7.1% of these meeting the current diagnosis of PTSD in the past month. There was no statistically significant association between bullying victimization and PTSD ($\chi 2 = 2.666$; df = 2; p = 0.261). Traumatic event experience was however significantly associated with high levels of bullying victimization experience $(\chi 2 = 4.266; p = 0.039)$. None of the assessed socio-demographic, familial or self-perceptual factors was found to be significantly associated with either bullying victimization or PTSD.

Conclusion. The experience of bullying victimization among secondary school students remains a prevailing problem in our local setting, as it is across the globe. Verbal bullying is the most common while physical bullying is the least common peer victimization experience in this study. The study points out that PTSD among high school students in our environment may be more prevalent than had previously been reported. Given the high rates of peer victimization experiences reported by students, there is a need for policy changes to make the school environment safer for students, thereby promoting their mental health.

The relationships between Big Five Personality dimensions, harmful psychoactive substance use and academic motivation among undergraduates in Nigeria

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Aims. The aim of this study was to determine the relationships between personality traits, stress perception, academic motivation and harmful use (use related harmful consequences) of alcohol, tobacco and cannabis among undergraduates in Southwestern Nigeria.