Objectives: The study aims to compare the main parameters of the original questionnaire to that of the version translated in Russian.
Methods: The original questionnaire was translated into Russian and administered to 40 adolescents (21 males, aged 12 to 17) with mental disorders except for severe cognitive deficits or pervasive developmental disorders. Means and Cronbach's alpha for each of the four scales were assessed and compared to the author's questionnaire values.
Results: Reliability analysis revealed similar Cronbach's alpha for 3 of 4 scales (table 1) except the Secrecy scale (1 of 6 questions showed low consistency; its exclusion increased α from 0.63 to 0.74).

	Cronbach's α		*M (SD)*		
Scales	*Original version*	*Translated version*	*Original version*	*Translated version*	*t-test*
Societal Devaluation	.76	.76	2.3 (0.40)	2.3 (0.42)	.501
Personal Rejection	.78	.70	0.48 (0.39)	0.33 (0.29)	*.002*
Self-Stigma	.81	.76	2.0 (0.74)	2.2 (0.68)	.122
Secrecy scale	.84	.63	2.5 (0.50)	2.5 (0.55)	.594

The means for each scale were compared with original data using a one-sample t-test. Only the Personal Rejection scale was significantly low on average than the original data.
Conclusions: Preliminary results showed that Russian adolescent patients perceived the translated questionnaire much the same way as American ones. Thus, our findings provide optimistical perspectives of further adaptation of the questionnaire.

Disclosure: No significant relationships.
Keywords: Questionnaire; self-stigma; Adolescents; Mental Health treatment

EPV0203

Psychiatric help for adolescents with autoaggression in Ukraine population

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Introduction: During several years in Ukraine have been actualized problem with autoaggressive behavior amoung young people. Due to not enough support at ambulatory psychiatric and social systems these patients have hospitalizations. And its duration could be for month and longer. The problem seems like if hospitalization can be ling, will be it affective while there are no community support after it. Even having good results can not give long "remission" because patients come to the same family/social situation.
Objectives: Examine autoaggressive behavior in adolescents and find criteria for hospitalization for this category.
Methods: We took 173 patients with autoaggressive behavior at age 18-25. We formed theory for research that, on our opinion, include information that give chance to find criteria while hospitalization isn't recommended.
Results: First results have shown a high level of comorbidity personality disorders with neurotic and depressive disorders. High levels of self-harm are associated with episodes of sexual and psychological abuse and characterized with trauma. The next parts of the research will show deep indications for in- and out-patient treatment.
Conclusions: Criteria for hospitalization adolescents with self-harm are hard to form because of differences of reasons, comorbidities and risk of suicide among adolescents. But not all in-patient treatment gives expected results. Mostly it can work like a traumatic experience on this group. Scientific research can help to make the psychiatric systems friendly to adolescents with complex problems. The authors have not supplied a conflict-of-interest statement

Disclosure: No significant relationships.
Keywords: Suicide; criteria; self-harm; prevention

EPV0207

Care pathway for autistic children and their families in Europe.

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Introduction: Autism is a lifelong complex neurodevelopmental condition that affects brain development and behaviour with significant consequences for everyday life (WHO, 2018). Despite its personal, familial and societal impact, there is still a European-wide lack of harmonised guidelines about the support needed from early stages, the most sensitive time to gain positive future outcomes (Berajamo-Martin et al, 2019).
Objectives: The objectives were: 1. To analyse autistic children care pathway and patient/carer journey in three European countries: Italy, Spain and U.K. 2. To propose policy recommendations on how to improve this pathway.
Methods: To identify major barriers and treatment gaps, we conducted a rapid literature review of the care pathway in Europe and a survey aimed at parents or carers of autistic children ages 0 to 18 living in the three countries. The survey gathered information on screening, diagnosis, accessibility and support received before, during and after diagnosis. Members of the working group met to discuss results and propose policy recommendations.
Results: 1. Current care pathway analysis showed the following treatment gaps: Long waiting time from first concerns until screening visit and confirmed diagnosis. Delayed or no access to intervention once diagnosis has been confirmed. Overall limited information about autism and how to access early detection services. Overall deficient support to families. 2. Please see Box 1 for our proposed policy recommendations.