Introduction: Women with schizophrenia require health interventions and safe spaces sufficiently different from those of men.
Objectives: To describe units in two mental health outpatient services specialized in the treatment of women with schizophrenia and related disorders.
Methods: Two units in Spain projected to treat women with schizophrenia and related disorders - Community Mental Health Programs (CMHU Rambla, CMHU Sant Cugat) will be described. Recruitment, assessment, intervention, and evaluation and satisfaction measures will be characterized, and the need to build-in safety precautions (policy/structural).
Results: Demographics:(Preliminary 2021 data on the two services).
Patients attending (CMHU): 3,393. Forty-five per cent diagnosed with severe mental illness. Schizophrenia and related disorders: 873 patients. 58% women.
Staffing projected: 2 psychiatrists, 2 nurses, 1 clinical psychologist, 2 social workers.
Physical structure: Safe spaces for women/children.
Programs (offered currently and in planning stages): 1)Therapeutic Drug Monitoring/Adherence, 2)Individual/group patient/family sessions, 3)Perinatal Mental Health (preconception, pregnancy, lactation, postpartum, parent training/support), 4)Collaborative programs (primary care, medical specialties especially obstetrics/gynecology and endocrinology, trauma specialists, addiction experts), 5)prevention/intervention of suicide risk, 6)social services (single mothers, family issues, domestic abuse, sexual exploitation) 7)home-based services, 8)peer support, 9)physical activity, 10)psychoeducation for patients and families.
Planned quality evaluation measures: diagnostic assessment (reliability, long-term validity);regular treatment effectiveness evaluation (individualization of treatment plans, assessment of adverse effects of drugs, screening for metabolic syndrome/ physical health, family intervention, psychoeducation (individual/group) assessment of suicidal ideation and global functioning.
Conclusions: Specific services for women with schizophrenia and related disorders represent an important resource to improve patient well-being and offer clinical care leading to individual recovery.

Disclosure of Interest: None Declared

EPV1100

The link between Pos-Traumatic Stress Disorder and Childbirth

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Introduction: Childbirth can be experienced as distressing or even traumatic for some women and her partners, which could cause psychological distress, intense fear or helplessness and increases the risk of anxiety, depression and even post-traumatic stress disorder (PTSD). The reported prevalence of post-traumatic stress disorder after childbirth ranges from 1.5% to 6%.
Objectives: The current study aimed to elaborate a narrative literature review to identify predictors associated development of PTSD in women and the partners.
Methods: PubMed database searched using the terms "post-traumatic stress disorder" and "childbirth" and "trauma". Only research conducted in the past 20 years was considered for inclusion.
Results: Several variables were associated with risk to development PTSD after childbirth, including negative experiences and severe fear of childbirth, subjetive distress, previous abortion, psychological difficulties in pregnancy, previous psychiatric problems, history of PTSD and trauma. Futhermore, obstretic and birth-related factors such as pregnancy complications, type of birth could also contribute to PTSD in women and her partners. Additionally, diferent environmental factors like poor interaction between provider and mother, low social support during labour and birth are associated with development of PTSD.
Conclusions: Clinicians should be aware that many women and her parterns have a risk to development PTSD following childbirth. We need to research risk factors in routine clinical practice and carefully monitored the patients with high risk.

Disclosure of Interest: None Declared

EPV1101

MOTHER-CHILD RELATIONSHIP IN THE CONTEXT OF DOMESTIC VIOLENCE

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Introduction: Mother-child relationship has a major role in a child's cognitive, emotional and behavior shaping. Unfortunately, in the context of domestic violence, this relationship can be negatively impacted becoming strained or distant.
Objectives: To assess the quality of Mother-Child Relationship in the context of domestic violence or intimate partner violence. And to investigate the factors influencing negatively the Mother-Child Relationship.
Methods: This is a descriptive and analytical cross-sectional study, conducted among abused women and their children, recruited from associations combatting violence against women, from Moulay abdellah hospital of Salé, and from consultation at the university psychiatric hospital Arrazi of Salé, through a hetero-questionnaire that includes socio-demographic characteristics and scales measuring the quality of mother-child relationship (IPA, CAM) and psychological distress of the mother and the child (EMMDP).
Results: From the results observed in women and children recruited in our study, we retain that various elements are impacting the mother-child relationship, such as psychological maternal functioning, child's behavior functioning, parenting qualities, insecurity of child's attachment, unhealthy internalized representations…
Conclusions: A better understanding of the factors influencing mother-child relationship, can allow us to offer more tailored