to promote the mental health of children from zero to eighteen months in educational institutions. The IRDI is a psychoanalytically based instrument that has shown the capacity to point developmental problems in children from zero to eighteen months. The IRDI research was sponsored by the Health Ministry in Brazil. In the present research, the 31 IRDI risk indicators served as guides for the educators in the follow up of psychical development under supervision of psychoanalysts. The first results show that the IRDI accompanying of the children can significantly reduce risk signals.

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Mo-O-15
Remedial psychological and pedagogic aid to children of the first age of life with perinatal damage of central nervous system, undergoing medical treatment
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In this research, we studied the needs in remedial psychological and pedagogical aid of children with central nervous system damage to determine the approaches to provide this aid as a complement to medical treatment. Building on the work of Vygotovsky, we present a systematic approach to developing cognitive abilities at an early age through involvement of pedagogical aid. Analysis of findings of psychological and pedagogical observation of children carried out at control ages (6 months, 12 months, 18 months, 24 months and 3 years of life) has shown that early pedagogic assistance stimulates the rate of neuro-psychological development of children, facilitates step-by-step formation of psychological abilities in every period of life, allowing to prevent onset of pronounced secondary abnormalities. We present the assessment of special pedagogic influence on psychological development depending on nature, structure and level of severity of damage of central nervous system and suggest a framework for design of individual developmental programmes for children undergoing medical care.

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Mo-O-16
Reflecting families in preschool settings: A preventive approach in early childhood mental health care
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About one third of children with intellectual disabilities (ID) are diagnosed with emotional and behavioural problems, common psychiatric disorders include adjustment, hyperkinetic or conduct disorders. A severe intellectual disability often means also severe impairment of psychosocial functioning. Psychotherapeutical approaches for ID children, adolescents and their families or care givers are rarely described. Group, family or single interventions specifically developed for these patients are barely to find, and observational measures of responses or other evaluation approaches mostly difficult to acquire. A systemic solution-focused method was provided to patients with intellectual and developmental disabilities in residential care and ambulatory settings. With treatment, cooperation improved and behavioral distress often decreased, and patients became more interested and regularly involved in single, group or family sessions. Our first results support the effectiveness of specific psychotherapy interventions for promoting cooperation in children and adolescents with ID.

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Mo-O-17
The necessity to look at co-existing z-codes co-morbidity in children attending the mental health services, 2 university hospitals experience
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It is estimated that 20% of children and adolescents in Malaysia have mental health difficulties. Analysis of service use over 5 years in the two university hospital has shown a consistent pattern is seen in terms of diagnosis as well co-morbid conditions. More than half of the children had at least one co-morbid condition. The most common co-morbid conditions consisted of problems related to their primary support group difficulties (Z63) resulting in problem related to negative life events in early childhood (Z61). The Problems in relationship in the primary support group includes severe and chronic discord between parents, in some resulting in violence, disruption of family by separation or divorce as well as controlling or permissive parenting styles. There is an apparent relationship of the children’s behavior to the familiar functioning and characteristics. Thus mental health professionals need to be aware that other than screening children for psychopathology extensive screening of their families must be included. Detecting and intervening in family difficulties has been found to be detrimental in improving the mental well being of the children seen at these services.

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Mo-O-18
An innovative art-based rehabilitation program for youths with stabilized psychiatric disorder: Espace de transition
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The program Espace de Transition aims to foster the rehabilitation of youths aged 14 to 25 with stabilized psychiatric disorders who are transitioning from intensive hospital care to the community. It consists of theatre and circus workshops focusing on expression, creativity and movement. It takes place in a non-clinical setting twice weekly during 12 weeks, and is conducted by artist-instructors. A clinical team is always available if needed. Each group gathers 15 voluntary participants, 10 patients, 5 healthy peers. Neither the artists nor the youths are aware of the status of participants. This allows a new perception of their potential capacities. The group is bound together by a public performance presented at the end of the 12 weeks. The program began 2 years ago. Preliminary results from an independent evaluation suggest improvements in the psychosocial functioning of participants (Archambault et al., 2012, abstract submitted). Illustrative video material will be presented.

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Adolescence

Mo-O-19
Hopelessness, self-esteem and other psychological characteristics of adolescents: Comparison between clinical cases and the community sample
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Aim:— Measurement, comparison and correlations of the levels of hopelessness, self-esteem, suicidality and the other psychological difficulties of adolescents referred to clinic (N = 57; mean Age = 16) and in community sample (N = 768; mean Age = 17.52).

Method:— Referred adolescents to the clinic and sample of adolescents at school fill out these scales: Hopelessness children scale(Kazdin), Rosenberg self-esteem scale and SDQ questionnaire.

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