

problems of the system of institutional care for children with developmental disabilities in Russia.

**Disclosure:** No significant relationships.

**Keywords:** institutional care; Child Psychiatry; intellectual disability; WISC

### EPV0134

#### Recognition of emotional and expressive movements (gestures) and self-esteem of adolescents with affective disorders

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doi: 10.1192/j.eurpsy.2022.1078

**Introduction:** Successful adolescence depends on ability to correctly understand emotionally expressive gestures, especially symbolic (same meaning for everyone) and expressive (individual understanding). Presence of an internal mismatch in adolescent's self-esteem between what he shows in society and what he really feels can lead to difficulties in forming an adequate adult self-esteem.

**Objectives:** Adolescents with affective disorders (F31) -12, normal adolescents - 32. Ages 12-17.

**Methods:** Recognition of emotionally expressive movements: postures&gestures (gestures-test), direct self-esteem by Dembo-Rubinstein test and indirect self-esteem by color attitude test by Etkind.

**Results:** The Mann-Whitney test showed significant differences between samples in terms of self-esteem gap - "mind" ( $U=270,000$ ,  $p<0.37$ ), "character" ( $U=279,000$ ,  $p<0.20$ ), "happiness" ( $U=288,000$ ,  $p<0.01$ ), gestures-test "symbolic" ( $U=301,000$ ,  $p<0.003$ ), "expressive" ( $U=292,000$ ,  $p<0.007$ ), "emotions" ( $U=109,000$ ,  $p<0.028$ ). Cluster analysis divided each of groups into two distinct clusters. Normal: Cluster1 small self-esteem gap, good gesture recognition, negative pole of emotions prevails. Cluster2 small self-esteem gap, worse gesture recognition, pole of emotions is closer to positive. Affective: Cluster1 large self-esteem gap in "mind", good gesture recognition. Cluster2 large self-esteem gap in "character", good gesture recognition and bright negative pole of emotions.

**Conclusions:** Gestures recognition in normal group is significantly higher than in affective disorder group. Normal adolescents clusters are distinguished by change in gaps throughout self-esteem and pole of emotional recognition. Affective disorder clusters differ by significant gap in one of self-esteem parameters, as well as in the degree of emotional recognition. Those with the largest "character" gap are more likely to attribute negative emotions to gestures than those with larger "mind" gap.

**Disclosure:** No significant relationships.

**Keywords:** affective disorder; self-esteem; gestures recognition; adolescent

### EPV0137

#### The influence of family on health anxiety in frequently ill adolescents

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doi: 10.1192/j.eurpsy.2022.1079

**Introduction:** Adolescents (especially frequently ill) from families where parents show high concern for their health, often themselves make complaints about their health status that do not receive medical confirmation (Kovalenko, 1998; Dielman et al., 1991). A study by T. Dillman and colleagues (1991) revealed a direct link between the perception of the disease in parents and children – the more seriously the parent perceives the child's condition, the more seriously the child treats it, and the more complaints he has.

**Objectives:** To study the influence of family on health anxiety in frequently ill adolescents.

**Methods:** The sample: 98 adolescents (mean age  $16.1\pm 0.9$ ), 84 their parents (mean age  $44.5\pm 5.0$ ). We used: "Short Health Anxiety Inventory" (SHAI; Salkovskis et al., 2002), The "Research on health-saving activities" (RHSA) questionnaire (Yakovleva, 2014), Questionnaire "Index of attitude toward health" (Deryabo, Yasvin, 1999).

**Results:** The results of multiple regression analysis showed that health anxiety in adolescents is determined by the following parent's features: goal-setting in the field of health-preserving activity ( $-0.661$ ,  $p=0.036$ ), standards of health ( $0.518$ ,  $p=0.028$ ), self-efficacy in the field of health-preserving activity ( $0.892$ ,  $p=0.010$ ), cognitive scale of attitude toward health ( $0.586$ ,  $p=0.032$ ) and scale of actions ( $0.059$ ,  $p=0.002$ ). It is also determined by parents' vigilance to bodily sensations ( $0.815$ ,  $p=0.000$ ).

**Conclusions:** Health anxiety in adolescents is influenced by both cognitive, motivational and behavioral components of the attitude toward health of their parents, and also sensory (negative physical sensations and symptoms in parents form anxiety about health of their children). Research is supported by the Russian Science Foundation, project No. 21-18-00624.

**Disclosure:** Research is supported by the Russian Science Foundation, project No. 21-18-00624.

**Keywords:** health; subjective pattern of health; health anxiety; frequently ill adolescents

### EPV0139

#### Psychotropic drug use among children and adolescents in the Nordic countries - A systematic literature review

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doi: 10.1192/j.eurpsy.2022.1080