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stressful relationships with supervisors and funding difficulties. Several studies have indicated that most graduate students spent over 40 hours per week on their postgraduate program, more than 70 % were not able to complete their programs within the set timeframe, and had uncertainty related to their job

**Objectives:** In this review, we discuss the mental health of post-graduate students focusing on depression, anxiety, stress, and smartphone addiction.

**Methods:** a review presentation of the mental health of postgraduate **Results:** According to meta-analysis, depression prevalence among postgraduate participants ranges from 6.2% to 85.4% in 36 studies. The pooled prevalence was 34% (26,579 individuals; 95% CI: 28–40). A study using the GAD-7 scale to evaluate the prevalence of anxiety concluded that 41% of postgraduate students suffered moderate to severe GAD, which is about six times the prevalence of GAD among the general population. A Study demonstrated 51.0% of the participants had smartphone addiction. A significant association was also observed between extensive smartphone use and depression (P = 0.001). Of the smokers in this study, 41.5% were addicted to smartphones (P = 0.039). Smartphone addicts had approximately two times the chance of having insomnia (OR = 2.113) (P = 0.013). In addition, they showcased more ADHD symptoms (OR = 2.712) (P < 0.001).

Conclusions: Studies identified a higher prevalence of mental illnesses among postgraduate students than in the general population. Although students affected are highly educated, their awareness of mental health is not sufficient to know their mental symptoms and seek help. Therefore, we suggest launching wellness programs to enhance their mental health.

Disclosure of Interest: None Declared

## **EPP0606**

## Impact of Ageism on Civic Engagement and Mental Health Among Older Adults: A Qualitative Study

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doi: 10.1192/j.eurpsy.2024.713

**Introduction:** Ageist beliefs and attitudes may restrict the opportunities for older adults to participate actively in their communities, resulting in strong effects on mental health.

**Objectives:** This study has three objectives: 1) To investigate the effect of ageism on older adults' civic activities; 2) To analyze the influence of ageism on mental health; and 3) To explore the impact of civic participation on older adults' mental health.

**Methods:** This qualitative study included 391 older people from three different nationalities (Portuguese, Brazilian and English) ranging in age from 65 to 88 years old. All the interviews went through the process of content analysis.

**Results:** For the first objective, findings encompass four major themes: (1) Social disapproval (86%); (2) Perceived Ineptitude (84%); (3) Anticipated Failure (83%); and (4) Inability to Contribute (77%). For the second objective, findings indicated six categories: (1) Helplessness and Despair (89%); (2) Rage (81%); (3) Self-Perceived Inability (77%); (4) Sense of Unimportance (71%); (5) Anxiety (68%); and (6) Outbursts of Emotion (63%). For the

third objective, the following five major subjects emerged: (1) Meaningfulness (81%); (2) Embracing Social Belonging (80%); (3) Cognitive Abilities (71%); (4) Personal Empowerment (67%); (5) Emotional Expression (54%). Additionally, findings indicated that the most verbalized themes for the three objectives were the same across the three nationalities.

Conclusions: The results of this study offered insight into how ageism, mental health, and civic engagement are related. Ageism seems to have a negative impact on mental health. Ageism also made it difficult for people to participate in civic life, which has been linked to better mental health. These findings emphasize the need to identify ageism and encourage inclusive civic involvement to improve older individuals' mental health.

Keywords: Mental health; ageism; civic participation; older adults.

Disclosure of Interest: None Declared

## **EPP0607**

## Adolescents' mental health and well-being in light of their substance use and the presence of special education needs

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Introduction: Promoting mental health during adolescence is an essential health education objective and a crucial time for the formation of healthy mindset and behaviors. During this period, individuals are more likely to engage in health risk behaviors that can contribute to mental health problems that manifest in later adulthood. It has been demonstrated that optimal psychological health and the quality and application of students' emotional and social skills may prevent and reduce the onset of risky health behaviors, such as subtance abuse. Students with specific learning difficulty (SpLD) are at higher risk to develop problem behaviors and they require special attention for promoting their mental health.

**Objectives:** The aim of the present study is to investigate mental health and well-being, and health behaviors as well as substance use in a sample of adolescents including those with SpLD, using the SDQ 'Strenghts and Difficulties Questionnaire', a widely utilized instrument for the multidimensional assessment of mental health in children and adolescents.

**Methods:** Our study included 276 school-aged children (mean age: 13.57 years; SD: 1.81; boys: 54.7%), 143 of whom had SpLD. We utilized a self-administered, anonymous questionnaire that included the Adolescent Psychological Well-Being Questionnaire, the Life Satisfaction Scale, and the WHO Well-Being Questionnaire. Peer support, individual internal psychological resources, and health risk behaviors were also assessed.

**Results:** The statistical analyses revealed a number of noteworthy differences. First, the SDQ scores of smoking and drinking adolescents were substantially different from those of their peers on the dimensions of emotional symptoms, conduct problems, and hyperactivity in the case of smoking (p<.05), and on the dimensions of hyperactivity and prosocial behavior in the case of drinking (p<.05). On the other hand, significant differences were found between boys and girls, particularly in the domains of prosocial and affective symptoms (p<.05). Individuals with SpLD exhibited distinct