

Background Screening questionnaires for mental health problems are useful tools for research and clinical practice.

Objectives To identify mental health problems and overall emotional functioning among general population samples in Kosovo as indicators for evaluation of needs for mental health services.

Methods It is cross-sectional quantitative study. Participants from two samples: students (filled-out directly) and online respondents ($n=540$; mean age = 24.84; SD = 8.29) were included in this study. All participants were asked to complete the Albanian translation of Mental Health Inventory (MHI-38). Data processing was done with SPSS 21.0 and Microsoft Excel 2007.

Results In total 11.2% of participants ranged at low level of mental health index. Regarding anxiety the high level is found at 51.3% and regarding depression high level is found at 24.5% of participants. A significant gender difference is found whereas females show greater depression ($P=.022$, $r=.09$), greater psychological distress ($P=.000$, $r=.17$) and lower mental health index ($P=.000$, $r=.17$), than males. A significant difference between samples is found whereas online sample show greater psychological distress ($P=.000$, $r=.18$), less anxiety ($P=.001$, $r=.13$) and lower mental health index ($P=.000$, $r=.22$) than direct sample.

Conclusions The findings are quite intriguing. Future research is needed to find out more understanding on gender, anxiety, depression, psychological distress and mental health. Socio-cultural aspects can be of great importance to be examined. Despite this, needs for mental health services are inevitably and must be addressed properly.

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EV0513

The assessment of social disabilities with GSDS-II in persons hospitalized in psychiatric day units and inpatient wards

T.M. Gondek^{1,*}, A. Królicka¹, B. Misiak², A. Kiejna¹

¹ Wroclaw Medical University, Department of Psychiatry, Wroclaw, Poland

² Wroclaw Medical University, Department of Genetics, Wroclaw, Poland

* Corresponding author.

Social disabilities due to mental disorders have a similar or even more severe impact on daily activities than some of the chronic, severe somatic disorders. The second version of the Groningen Social Disabilities Schedule (GSDS-II) is used in the assessment of social disability in persons with mental disorders. To date, in Poland the conducted research studies focused on this matter only in patients consulted in outpatient clinics and day units. Our study is the first in the country that aims to measure the social disabilities in persons hospitalized in psychiatric inpatient wards. The objective of the study is to assess the degree of social disability using GSDS-II as well as to analyze the impact of clinical, socio-demographic and economic factors on social disabilities in patients diagnosed with psychotic, mood or anxiety disorder (diagnostic codes: F20–F29, F30–F39 and F40–F48, according to ICD-10), aged 18–65, in a day unit and an inpatient ward settings. The excluding criteria are: substance abuse co-morbidity and/or a diagnosed dementia process. The study presents the data gathered from a sample of 50 patients of both genders diagnosed with the aforementioned mental disorders who gave their informed consent to participate in the study. Due to important socio-economic implications of mental disorders that frequently result in the loss of ability of the patients to fulfill their societal roles, a study leading to a better insight on social disabilities will provide useful data for the possible improvement of the mental health care and social policy designed for these persons.

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EV0513

The impact of stigma and discrimination on the quality of life and social disability in persons with a diagnosis of mental disorder. A pilot study

T.M. Gondek*, K. Kotowicz, A. Kiejna

Wroclaw Medical University, Department of Psychiatry, Wroclaw, Poland

* Corresponding author.

Stigma and discrimination of persons diagnosed with mental disorder is a common issue. In many European countries, research studies on the prevalence and implications of this problem are conducted in order to better understand how to overcome it. In Poland, there is a scarcity of such studies, what results in neglecting this issue by the policy makers. The objective of the study is to assess the prevalence of stigma and discrimination affecting the patients hospitalized in psychiatric day units and in-patient wards between 2016–2017 as well as to analyze the relationship between the stigma and the quality of life and social disability in persons with a mental disorder diagnosis of F20–F48 according to ICD-10, aged 18–65, in a day ward and an in-patient ward settings. The pilot study presents the data gathered from a preliminary sample of 20 patients of both genders diagnosed with the aforementioned mental disorders, equaling 10 per cent of the targeted total study sample. The quality of life is assessed with WHOQOL-Bref, WHO-5 questionnaire and Rosenberg self-esteem scale, while social disability is measured with the second version of the Groningen Social Disabilities Schedule. The assessment of the impact of stigma on the social disability of persons with mental disorders and their quality of life can be useful in the context of developing evidence-based interventions for these persons, while it could also provide the scientific data to support public information campaigns aiming at tackling the stigma against persons with mental disorders in Poland.

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EV0515

Attitude to and social distance from schizophrenic patients as forms of stigmatization, investigated by a group of medical professionals and a group of non-professional subjects

G. Grbesa*, M. Simonovic, M. Stankovic

University of Nis, Faculty of Medicine, Psychiatry, Nis, Serbia

* Corresponding author.

Introduction The attitude to schizophrenic patients has always been considered a significant indicator of stigmatization of mental patients. The social aspect of stigmatization involves the social distance when speaking about the attitudes towards mental patients. The social distance is defined as “a various degree of understanding and feelings existing among the groups”.

Objectives The investigation included 120 participants divided into two groups. The first group included 60 participants; psychiatrists (38) directly involved in treating schizophrenia and 28 nurses working in wards where schizophrenic patients were treated. The second group of 60 participants included non-professionals divided according to age and gender to match the experiment group.

Aims Investigating the correlation between the proclaimed attitudes to and social distance from schizophrenic patients: medical professionals and non-professional subjects.

Methods Semantic differential scale was used to examine the personal attitudes towards a stigmatized group. To examine social distance, the modified Bogardus Social was used.

Results The results obtained using the Semantic differential scale to examine the attitudes did not show statistically significant score difference between the two groups of patients Bogardus Social Distance Scale score showed statistically significant difference ($P > 0.03$). A significant score on the scale of social distance can be recognized in both psychiatry professionals and non-professionals.

Conclusion Stratification of items on the social distance scale shows a great social distance in the sphere of intimacy and slightly lower score on the level of social relations. The group having competent knowledge concerning the disease shows sophisticated way of hiding behind professional reasons.

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Relation of stress coping strategies and depressive symptoms in university students

D. Kara¹, H. Gulmez^{2,*}, G. Hizli Sayar²

¹ Üsküdar University, Psychology, İstanbul, Turkey

² Üsküdar University, Psychiatry, Kadikoy, Turkey

* Corresponding author.

Relationships between students' coping strategies with stress and effects on depressive tendencies of negative automatic thoughts are examined in the poster. A group of 153 (126 female and 27 male) university students attending the University of Üsküdar were examined using the Coping Strategy with Stress Indicator (CSSI) to measure the styles of coping with stress; the Beck Depression Inventory (BDI) to measure the level of depression and the Revised Automatic Thoughts Scale (ATS-R) to measure the negative automatic thoughts. Significant relationships were established among CSSI, BDI and ATS-R.

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EV0517

Health intervention in gender violence

R. Hernandez Anton*, C. Noval Canga, N. De Uribe Vitoria, I. Sevillano Benito, J.A. Espina Barrio, P. Marques Cabezas, L. Gallardo Borges, A.I. Segura Rodriguez, M. Gomez Garcia, F. Uribe Ladron De Cegama

Hospital Clinico Universitario Valladolid, Psiquiatria, Valladolid, Spain

* Corresponding author.

Introduction Male and female social roles were built on a historical inequality. Gender violence is a public health problem of the first order. We consider it important to conduct a study to improve diagnosis and interventions. From the Theory of Roles Moreno, each role has a complementary role that maintains the link. In gender violence predominates control, domination, submission and asymmetry of functions as dysfunctional elements of a relationship, which should be symmetrical.

Methodology We reviewed 48 stories of women who come for abuse mental health team from 2013 to 2016. We analyzed the following aspects: socio-demographic data (age, nationality, marital status, education, jobs, dependent children); reason for

consultation and number of queries; violence; roles, because of maintenance and interventions.

Results Eighty percent Spanish. It occurs at all levels of education; 60% have children; 70% were derived from primary care for others reasons; almost 90% suffered psychological violence, 25% physical and economic, sexual only 3 women, 52.08% of women adopt a submissive role, passive-aggressive 20.83% and 25% ambivalent; maintenance of the violence is reinforced by the psychological dependence that occurs in all women (one in 45.83%).

Conclusions Roles analysis is an effective method in the diagnosis of abuse and designing appropriate intervention. Psychotherapy, benefits of a psychopharmacological treatment that lessens the suffering and lets face their difficulties. It is important to ask about abuse at any level of care, because it contributes more to cover a hidden reality. The Psychological and economic dependence. They establish and maintain the mistreatment.

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EV0518

Protective and risk socio-economic – environmental factors affecting mental health

M.I. Hussain

Khyber pakhtunkhwa Health care commission, Iftikhar Psychaitric Hospital, Peshawar, Pakistan

Over all generic, biological, environmental and socio-economic factors are attributing towards mental health and well being of a person. But among these socio-economic – environmental factors play a great role. It is very important to understand socio-economic – environmental protective and adverse factors affecting mental health. There is very dynamic interaction between individual attributes like socio-economic circumstances and environmental factors. The dynamic interactions of all these three factors determine the final outcome and status of mental health social well being. So, for our professionals particularly and community in general, it is very important to have full knowledge about all these factors. Because lack of managing and integrating of socio-economic-environmental factors, we will not be able to deliver quality psychiatric/psychological services. Community at large will also be ignorant of it and will not be able to play their roles towards healthy mental health formation. Moreover, these socio-economic – environmental factors are within our reach and can be modified.

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EV0519

Social rituals as an early indicator of mental illness

A. Janca*, J. Gaspar

The University of Western Australia, School of Psychiatry, Perth, Australia

* Corresponding author.

Introduction Social rituals refer to routine and expected social activities that are practiced in all communities in a culturally recognized manner (e.g., social greetings, eating customs, attention to dress, sleeping rituals etc.). Persistent departures from or disregard of these social rituals may be an early or prodromal sign of the onset of mental illness.

Objectives (1) To develop and evaluate psychometric properties of a measure of social rituals entitled, Social Rituals Schedule (SRS);