

be rude, even if only they are only blunt ($P=0.006$). We found no differences in empathy between first year and last year MS.

Conclusions In our sample of Italian students, we have not found MS to be more or less empathetic than other university students, but there are some peculiar differences in empathy that make them better suited to the chosen course of study. Moreover, we found no differences between the different years of medical school.

Disclosure of interest The authors have not supplied their declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1361>

EV1032

Owning the brand of psychiatry

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In Australia and New Zealand, conversations around mental health are playing out in the public space with increasing frequency. Mental health promotion campaigns and organizations are embraced by mainstream and other forms of media, and supported by government. Whilst public knowledge of mental illness is increasing, the profile of psychiatrists as leaders and medical experts in mental illness is a more difficult brand to sell. With a somewhat tarnished history behind us, the modern evidence-based practice of psychiatry is not always at the forefront of public impression. Furthermore, in Australia, more than half of the population (56%) is unaware that psychiatrists have undertaken medical training as a doctor. This presentation will outline Royal Australian and New Zealand college of psychiatrists (RANZCP) action to improve community information about psychiatry, psychiatrists and treatment experiences.

Disclosure of interest The author has not supplied his/her declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1362>

EV1033

Prejudice towards people with mental illness

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This paper reports the results of a medical research that measured prejudice and attitudes towards mentally ill people and towards the mental illness. Three groups of respondents were studied: medical students, psychology students and the general population. Medical students and psychology students represented a population that is educated in regards to mental illness, and the general population was not trained so much about mental illness. The hypothesis was that the respondents who have been working with mentally ill people and had lots of knowledge about mental illnesses were the persons with less prejudice towards people with mental illness. The main objective of research was to examine the differences in prejudice and attitudes between respondents who had experience and knowledge related to mental illness and people with mental illness compared to those without such knowledge and experience. Testing was conducted using an anonymous online survey consisting of thirteen questions. The research confirmed the hypothesis and it could be an incentive for education aimed at specific groups.

Disclosure of interest The authors have not supplied their declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1363>

EV1034

The importance of early detection of child neurodevelopment in primary care in Colombia

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Introduction The systematic assessment of child development for the first 30 months of age is essential in the monitoring of health outcomes; this requires to have a structured protocol to systematically observe the milestones that have to be achieved at each stage of child development, and prevent deficiencies related to risk factors, reduce and prevent special needs arising from a deficit of the neurodevelopment.

Objective Describe the results of the evaluation of early detection of neurodevelopment problems in subjects from 0–30 months of age who assist to child developmental centers in municipalities located in the Colombian Caribbean region; the main need for intervention was characterized with different neurodevelopment problems.

Methods A cross-sectional study was developed. Childs from 0–30 months of age who attended to the child development centers were tested. Exclusion criteria were not stipulated. The ASQ-3 and a demographic survey (Graffar's survey) were administered, in order to correlate the social level and the overall results.

Results The study included 750 boy/girl. The maturational development for each age group was determined, an analysis of each neurodevelopment area was conducted and the results were correlated with the demographic survey.

Conclusions High levels of suspicion of possible neurodevelopment problems and the referral to diagnostic evaluation were observed for access to appropriate treatments. Early detection is highlighted as a tool in primary care that optimizes health sector resources and act in the appropriate periods of plasticity of child development.

Disclosure of interest The authors have not supplied their declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1364>

EV1035

Psychiatric treatment-associated stigmatization as viewed through eyes of rural health clinic patients

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Introduction Having a mental disease is frequently a stigmatizing experience for patients. We know little about urban inhabitants who travel to rural health clinics to receive mental treatment.

Objectives Recruit and interview urban-based psychiatric patients who, to avoid stigmatization; travel to rural community clinics with the intention of receiving treatment.

Methods Study included participants ($n=32$) who exchanged treatment in government subsidized city clinics for rural community centers. Qualitative interviews lasting thirty minutes were recorded and transcribed for content analysis. MAXQDA, version 12, was used to annotate transcripts with topic specific nodes, followed by cluster theme and trend analysis.

Results Trend analysis yielded three areas of concern for subsidized urban psychiatry: cost/insurance, lack of staff professionalism, and family-driven ostracism. Seven respondents cited cost as the main factor, influencing the choice of rural-based care over city clinic. Patients with stable income, but without insurance ($n=14$), felt unwelcome in city clinics as their ability to pay

was frequently questioned by supporting staff. Lack of trained social workers caused additional distress, as participants could not receive access to additional resources. Only four patients said that their psychiatrists acknowledged poor clinic environment and encouraged remaining in treatment. For 18 respondents, family demanded that they receive treatment in rural clinic so that no one finds out about their mental disease.

Conclusion In large urban clinics, stigma in psychiatry comes in many flavors, especially projected by unprofessional clinic staff and ashamed family. Lack of support forces patients to travel to rural premises to receive unbiased, stress-free care.

Disclosure of interest The authors have not supplied their declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1365>

EV1036

Training occupational therapists in how to use cognitive behavioral therapy in their practice

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Introduction Cognitive behavior therapy (CBT), which is used by mental health professionals including occupational therapists (OT) is a time-sensitive, structured, present-oriented therapy directed toward solving current problems and teaching clients skills to modify dysfunctional thinking and behavior.

Objectives Supporting the development of CBT theory and efficient use by mental health professionals are vital.

Aim To present the results of CBT training for OTs, which was funded by “European Union technical assistance for increasing the employability of people with disabilities” project (Europe Aid/136449/IH/SER/TR).

Methods Using a basic CBT theoretical framework the participants attended 96 hour face to face training modules with written materials including fundamental features, preconditions and methods used in CBT. A Turkish CBT book was published for course. Participants trained their skills under supervision and send the results to educators. Pre-post of training CBT knowledge and quality of training (plan-contents, educators, and environment) were evaluated by 5-Likert scale.

Results Thirty OTs (f = 23, m = 7) mostly 43.3% PhD; 20–25 (30%) and 45–50 (26.7%) years age period were included. Total mean score for quality of education was 109.4 ± 29.4 with 23.63 ± 4.34 , 47.36 ± 6.41 , 38.40 ± 21.61 for plan-contents, educators, and environment subscores, respectively. CBT knowledge was increased from 15.70 ± 6.08 to 45.06 ± 4.59 ($P < 0.001$).

Conclusion Training increased CBT awareness and practice skills of OTs. Teaching OTs CBT may increase their understanding of person-environment-occupation approach, psychological problem solving, occupational engagement and participation of individuals. Our result supports that mental health professionals should collaborate to share ideas, develop guidelines and promote good practice examples in client-centered and holistic rehabilitation care.

Disclosure of interest The authors have not supplied their declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1366>

EV1037

Patient education for behavior change: Harm reduction and hypertension control

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Background Chronic non-communicable diseases (NCD) are a public health problem in Brazil. In addition, NCDs is more strongly associated with common mental disorders than was each NCD individually. This study is about the implementation and execution through the university extension project “harm reduction and mental health: hypertension control and health education” developed at Images of the Unconscious Museum, Brazil.

Aims Measure the prevalence of hypertension, verify the association with chronic NCDs, educate about risk behavior and improve to psychosocial rehabilitation.

Methods A socio-demographic and blood pressure profile was constructed. We identify hypertension on 33 patients. After the diagnosis, the family health unit was contact to construct a clinical care plan. We distribute health educational material about clinical diseases.

Results Thirty-six percent patients was identify with hypertension; once had high blood pressure and rejected any intervention; 68% have family rates of hypertension and 100% referred low salt on diet. A book storytelling was constructed to give orientations about health lifestyle. We conducted therapeutic workshop to highlighting the creative, imaginative and expressive potential of the users on health behavior.

Conclusion We identify low blood pressure after the activities and a new health style after the orientation process.

Disclosure of interest The authors have not supplied their declaration of competing interest.

<http://dx.doi.org/10.1016/j.eurpsy.2017.01.1367>

EV1038

Demonstrating the methodology of a pilot programme for establishing a system for mental health promotion in Hungary

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Introduction A 12 month long mental health promotion pilot programme in Hungary, funded by the Norway Grants, will finish on 30th April 2017.

Aims To launch six community mental health promotion centers (MHPCs) located in various economic environments, supervised by one Methodological Center plus expert teams and carrying out studies on the effectiveness of the launch of the system. The final recommendations will constitute a basis for setting up a national network for mental health promotion.

Objectives To develop a sustainable model for establishing a national network of MHPCs; to map and record the mental health problems and the stakeholders of the area; to find and assess the local best practices; and to raise public awareness in the following mental health problems: depression, suicide, stress and dementia.

Methods (1) Models for inducing changes in the knowledge and attitudes upon mental health in the communities were reviewed in a systematic literature search. (2) Based on the results, a model of mental health promotion centers was outlined for problem identification, stakeholder mapping, assessing local best practices, organizing and supporting local networking activities for synergis-