Objectives: In this study, we aimed to assess 1) the mental health of students from nine countries with a particular focus on depression, anxiety, and stress levels and their fields of study, 2) the major coping strategies of students after one year of the COVID-19 pandemic.

Methods: We conducted an anonymous online cross-sectional survey on 12^{th} April – 1^{st} June 2021 that was distributed among the students from Poland, Mexico, Egypt, India, Pakistan, China, Vietnam, Philippines, and Bangladesh. To measure the emotional distress, we used the Depression, Anxiety, and Stress Scale-21 (DASS-21), and to identify the major coping strategies of students - the Brief-COPE.

Results: We gathered 7219 responses from students studying five major studies: medical studies (N=2821), social sciences (N=1471), technical sciences (N=891), artistic/humanistic studies (N=1094), sciences (N=942). The greatest intensity of depression (M=18.29±13.83; moderate intensity), anxiety (M=13.13±11.37; moderate intensity), and stress ($M=17.86\pm12.94$; mild intensity) was observed among sciences students. Medical students presented the lowest intensity of all three components - depression (M=13.31±12.45; mild intensity), anxiety (M=10.37±10.57; moderate intensity), and stress (M=13.65±11.94; mild intensity). Students of all fields primarily used acceptance and self-distraction as their coping mechanisms, while the least commonly used were selfblame, denial, and substance use. The group of coping mechanisms the most frequently used was 'emotional focus'. Medical students statistically less often used avoidant coping strategies compared to other fields of study. Substance use was only one coping mechanism that did not statistically differ between students of different fields of study. Behavioral disengagement presented the highest correlation with depression (r=0.54), anxiety (r=0.48), and stress (r=0.47) while religion presented the lowest positive correlation with depression (r=0.07), anxiety (r=0.14), and stress (r=0.11).

Conclusions: 1) The greatest intensity of depression, anxiety, and stress was observed among sciences students, while the lowest intensity of those components was found among students studying medicine.

2) Not using avoidant coping strategies might be associated with lower intensity of all DASS components among students.

3) Behavioral disengagement might be strongly associated with greater intensity of depression, anxiety, and stress among students.4) There was no coping mechanism that provided the alleviation of emotional distress in all the fields of studies of students.

Disclosure of Interest: None Declared

EPP0032

The analysis of risk factors for fear and aggression during global crisis – a study based on Polish students among the Covid-19 pandemic.

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Introduction: Although the Covid-19 pandemic ceased in the numbers of the affected patients, especially the ones with severe

manifestation of the disease, its influence on health still remains, affecting not only the somatic but also mental wellbeing. This global crisis impacted almost every person, but not equitable – the mental distress consisted of many, often synergic, risk factors which are not easily identifiable. The analysis of causal elements for aggression and fear deriving from the pandemic was conducted among Polish students, enabling thorough examination.

Objectives: The aim of the study was to analyse the risk factors contributing to the deterioration of mental health, especially presented as elevated fear and aggression levels.

Methods: Examination of fear and aggression levels was conducted on the group of Polish students using Fear of Covid and STAXI-2 questionnaires. Initially, 906 participants took part in the first round of the study. Four rounds were conducted, finally extracting a group of 231 participants tested in the four different time points of the pandemic in Poland, during the second and the third waves of the pandemic.

Results: Among the studied factors that have impact on the decline in the state of the mental health, statistically significant were female sex, being overwhelmed by the amount of news found in various media - a phenomenon called "infodemic" - altogether with poor health condition, both of the participants' and their relatives. Obtaining vaccination was a factor that lowered aggression in participants, but only the ones that were primarily eager to get one. Conclusions: The present deterioration of mental health in society was largely fuelled by the initial disturbance arising from global pandemic, general lockdown and financial crisis bound with it. The discrimination of risk factors for inefficient resilience was not possible on such a huge scale before. Unfortunately, as new challenges arise, the knowledge about the social groups most prone to mental crisis is necessary, as this is the only way to elaborate the proper procedures and guide a successful diagnostic process and treatment.

Disclosure of Interest: None Declared

Cultural Psychiatry 01

EPP0033

Development of a youth version of the Here and Now Aboriginal Assessment (HANAA-Y) tool

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Introduction: Assessment of social and emotional wellbeing (SEWB) of Aboriginal people is challenging. A The culturally appropriate screening instrument for SEWB in Aboriginal adults entitled Here and Now Aboriginal Assessment (HANAA), has been developed and evaluated. The HANAA explores ten key domains and adopts a yarning process to initiate a semi-structured interview that covers each domain. This is recorded in narrative form and each domain rated as 'problem' or 'no problem' and a 'recommended action' is determined. The HANAA is widely used by Aboriginal mental health service providers around Australia.

Objectives: There have been multiple requests by service providers for a similar instrument to be developed for young Aboriginal

people. This study aims to develop a youth version of the instrument abbreviated as HANAA-Y.

Methods: A Working Group comprised of Aboriginal and non-Aboriginal psychiatrists and mental health professionals with expertise of SEWB in Aboriginal youth was established and a draft version of the HANAA-Y has been produced. Evaluation od cultural applicability, reliability and validity of HANAA-Y is underway in metropolitan, rural and remote locations across Australia. **Results:** The original HANAA structure, yarning style, and rating has been retained. However, new domains and probe words relevant to young people have been selected. The new domains are as follows: somatic complaints; emotional issues; suicide risk and selfharm; alcohol and drug use; cognition and activity; behavioural and legal issues; strange thoughts and unusual experiences; functioning; stressful life events; and resilience and healing. The HANAA-Y administration guidelines have also been amended to be of relevance to Aboriginal youth.

Conclusions: It is expected that HANAA-Y will be a culturally appropriate and useful instrument which can be used by a range of service providers with differing levels of mental health training to screen for SEWB among young Aboriginal people.

Disclosure of Interest: None Declared

EPP0036

José Saramago's "Blindness" and a Vision for Mental Healthcare: perspectives in the fields of Literature, Architecture, Philosophy, Politics and Economics

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Introduction: The Portuguese writer and Nobel prize winner José Saramago, is well-known for his sharp depiction and reflection of human condition. The recent events of the COVID pandemic juxtapose with his novel "Blindness" (1995) – original title: "Ensaio sobre a Cegueira"–, where the expression of fear of dehumanization in a globalized world where any contemporary society may lead to the obligation to follow what power structures define and establish. In his epidemic of blindness, an abandoned psychiatric asylum was chosen by the author as a quarantine ward and the centre of the plot. A question imposes: why an asylum? What is the focus of such a place in a cultural postmodernism message?

Objectives: An historic background revision is proposed, glancing at the evolution of the architectural concept of asylum evolved until modern times, while setting a reflection towards today's mental health services and European models.

Methods: A narrative review was performed, gathering points of view in the fields of Literature, Architecture, Philosophy, Politics and Economics.

Results: Bertolt Brecht claims that "all art is political and the question is simply whether art attacks existing structures of power or refuses such attacks and thereby contributes to the continuation of those structures". Regarding evolution of Asylum Architecture, and the principles which ought to control Modern Construction, In "Blindness", the thematic of space appears above all through the reference of Marc Augé's Non-Place. Initially extended to the city, gives way to the funneling of the space that leads to the "asylum" - a

space that centralizes all the action. Through Saramago's description, the floor plans were designed by Portuguese architect José Cardoso. As the first waves of blind people are imprisoned, it is characterized as a heterotopia, the embodiment of Foucaudian panopticism, as it is constituted as a prison whose role is to isolate, even if this attitude is motivated by despair of the government. A mental healthcare system assumes a multidisciplinary approach to psychiatric disorders. Evidence points to a balance between community-based and modern hospital-based care, with frontline services based in the community and hospitals playing a more specialized role. For most European countries, mental healthcare is financed in the same way as other healthcare services, using either national, regional or local budgets and four ways to purchase mental health services are looked at in depth. Therefore, general decisions about such financing may not be in line with mental health policy-maker or planner.

Conclusions: Where culture meets anthropology, social policies, legal boundaries and ethic reflections, a time for a joint dialogue arises. How to surpass the differences and heterogeneity between countries? Is there a place for a common system in mental health care?

Disclosure of Interest: None Declared

EPP0037

Investigating the Impact of Perceived Discrimination on the Integration and Life Satisfaction of New Wave Turkish Immigrants Living in Germany

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Introduction: Approximately 21.2 million people with im- migrant backgrounds live in Germany, which constituted 26% of its total population in 2020. Approximately 67% of immigrants are from European countries, including Turkey. Turks account for 13.2% of immigrants and constitute one of the largest immigrant groups (Statistisches Bundesamt, 2020). The integration processes and life satisfaction of new wave Turkish immigrants are differ from the first and second generation Turkish immigrants.

Objectives: The aim of this study was to investigate the impact of perceived discrimination on their integration process and life satisfaction of new wave Turkish immigrants living in Germany.

Methods: The Community Integration Measure (CIM), Satisfaction with Life Scale (SWLS), The Perceived Discrimination Scale (PDS) were used. Pearson correlation and Regression tests were used in our analyses to observe the differences in scale scores according to the variables. The relationship between the scale scores was analysed with the Pearson correlation test. The effect between the scale scores was analysed with the regression test.

Results: The findings demonstrated that there was a significant negative relationship between perceived discrimination and social integration (p=0,05) as well as life satisfaction (p=0,05). In addition, there was a significant and positive relationship between social integration and life satisfaction of new wave Turkish immigrant participants.

Conclusions: The integration process and life satisfaction of new wave Turkish immigrants decreased when they perceive discrimination