

depression-dimension the BDI-II items pessimism, past failure, guilt feelings, punishment feelings and suicidal thoughts were positively related to the MRS-quantity.

Discussion and conclusion A dose-response-relationship was found, with a higher number of MRS being related to a higher severity level of self-reported depressiveness as well as to a higher level of cognitive depression-symptoms in particular. The increase in suicidal ideations in the light of MRS-exposure is in line with findings from other migrant populations. Therapeutic interventions may focus (more) on depressive cognitions as a result of recurring MRS-experiences. Special attention should be placed on suicidal thoughts being boosted by MRS.

Keywords Migration related stressors; Depression; BDI-II; Vietnamese migrants; Suicidality

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

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Impact of socioeconomic position and distance on mental health care utilization by incident users of antidepressants. A Danish nationwide follow-up study

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Introduction Equal access to health care treatment is a highly prioritized goal in most OECD countries. Timely access has become a priority too; in Denmark now with a 4-week deadline from referral to diagnosis. When mental health services become more centralized and allocation of patients to treatment further away from home become more common, it could have a negative impact on the goal of equal access.

Objective To determine the impact of socioeconomic position (SEP) and distance to provider on outpatient mental health care utilization among incident users of antidepressants.

Method A nationwide, Danish, register based, follow-up study on frequencies of contacts to out-patient psychiatric services, psychologist consultations supported by public funding and therapeutic talks by general practice.

Preliminary results Outpatient-psychiatric services were reached more often by patients in low SEP measured by income, but their frequencies of visits were less. Contacts to psychologists were less than half for patients in low SEP and less frequent too. Mental health service by GP showed low SEP associated with low contact. No difference in use of emergency or inpatient psychiatric services was found. Distance to provider showed interaction with SEP and contact to psychologist and frequencies of contact to outpatient psychiatrists. When distance increased by 5 km, contact to psychologist fell by 11% among lowest income group and frequencies of visits to outpatient psychiatrist fell by 5%.

Preliminary conclusion Lower SEP is associated with lower mental health care utilization. Increased distance to provider increases inequity in mental health service utilization.

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

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Prevalence and associated risk factors of psychotic symptoms in homeless people in France

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Introduction Homeless people are more likely to have higher prevalence of psychotic disorders than general population. However, we know less about the prevalence of psychotic symptoms in this group.

Objectives To estimate the lifetime and current prevalence of psychotic symptoms and their correlates among homeless people living in the Paris metropolitan area.

Methods We analysed data from 839 homeless randomly selected for the "Samenta" survey that studied mental health and addiction problems in this population. The mini-international neuropsychiatric interview was used to assess psychotic symptoms. Separate multivariate logistic regression analyses were conducted to estimate the associations of sociodemographic characteristics (age, gender, education level and migrant status), early life experiences (sexual abuse, physical and psychological violence, substance use) and psychiatric disorders.

Results The lifetime prevalence of psychotic symptoms was 35.4% (95% CI=28.1–43.5) and the prevalence of current symptoms was 14.0% (95% CI=9.8–19.6) with no significant difference between migrant and native groups, after exclusion of subjects with a diagnosis of psychotic disorder (n = 145). In multi-adjusted models, childhood sexual abuse was associated with an increased risk of lifetime or current psychotic symptoms (OR > 4, P < 0.05). Early life psychological violence was strongly associated with the risk of lifetime psychotic symptoms in natives (OR = 6.33; 95% CI = 2.10–19.0), whereas alcohol misuse in adolescence was related to lifetime or current psychotic symptoms in migrants (OR = 3.34; 95% CI = 1.20–9.37).

Conclusion Homeless people are at higher risk of psychotic symptoms compared to the general population in France. Our findings are consistent with the hypothesis that childhood abuse is an important risk factor of the psychosis continuum.

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

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The Italian admission experience survey: A factor analytic study on a sample of 156 acutely hospitalized psychiatric patients

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Introduction The admission experience survey (AES) is a reliable tool for measuring perceived coercion in mental hospital