

and used to inform how to best support individuals who may be at risk of requiring restrictive interventions.

**Disclosure of Interest:** None Declared

## EPV0571

### Context of implementation of mental health framework in Blumenau, Brazil (evidence based)

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**Introduction:** Promoting high quality mental health (MS) services is an obligation of many social agents due to the impact of these diseases on the population. Making care increasingly evidence-based does not depend exclusively on technical training, but also on gradual and functional changes in the structure of an institution. Improving the quality of services in MH is a predominantly social intervention, in which it is necessary to group and interpret complex data. They represent real-time interventions in a real world by teams delivering health services.

**Objectives:** Describe the context where the MH service (iNC) is inserted, its main characteristics and purposes.

**Methods:** Mixed study identifying the location, socio-demographic data, characteristics and fundamentals of an organization providing services in MH that proposes to act based on evidence.

**Results:** iNC is a private secondary care institution located in the city of Blumenau, Vale do Itajaí, state of Santa Catarina, Brazil (FIG 1). Vale do Itajaí is a mesoregion with approximately 1.5 million inhabitants composed of small regions: Blumenau, Itajaí Ituporanga and Rio do Sul. Most of the population is of German and Italian descent. Blumenau has 361,261 inhabitants, an average monthly income of 2.9 minimum wages, 97% of schooling between 6-14 years old and the number of deaths of 6.48 (1000 live births). iNC is located in the center of the city (3-story building) with a clinical staff idealized for 3 psychiatrists, 16 psychologists, 4 nutritionists, 1 nurse, 1 nursing technician and 1 physical educator in face-to-face and online, individual and in-person sessions group. Performs care for adult patients between 18-70 years. Its missions are: to promote MS care from an interdisciplinary perspective, to provide health interventions supported by the best individualized scientific evidence and to encourage teaching and research in the field of MH. Its guiding principles are: psychopathology and nosology (DSM-5 and CID-11), neuroscience and psychopharmacology, mood, anxiety, sleep, eating and obesity disorders (FIG 2), psychological treatments and psychoeducation, assessment instruments in MH and neuropsychology, evidence-based medicine, health promotion and disease prevention.

**Conclusions:** Identifying, measuring and quantifying a local assistance service in MH can help in its development and allow comparisons over time. The improvement of services depends on multiple factors and is necessary for their development, both for researchers, implementers, health professionals and patients.

**Disclosure of Interest:** None Declared

## EPV0572

### Mindset and emotional intelligence in pre-service teachers

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**Introduction:** Pre-service teachers must confront emotionally demanding situations associated with the profession, and they must be prepared for it. Previous literature has shown that two variables are important for managing mental health in this population: emotional intelligence (EI) and mindset. EI is the ability to perceive, facilitate, understand, and manage emotions, while mindset refers to beliefs about the malleability of various life domains. According to their mindsets, those who believe that attributes are malleable are called incremental theorists, and those who believe attributes are fixed are entity theorists.

**Objectives:** This study aimed to explore the influence of intelligence and EI mindset on self-report and ability EI in a sample of 224 female pre-school pre-service teachers (M= 21.27, SD = 4.72).

**Methods:** Participants completed a questionnaire battery, including intelligence mindset, EI mindset, the Mayer-Salovey-Caruso Emotional Intelligence Test, the Trait Meta-Mood scale, and paternal and maternal educational status.

**Results:** The results showed that incremental EI theories — but not intelligence — were related to higher scores on self-report and ability EI. Specifically, being an incremental theorist of EI predicted 11% and 20% of the variance in global EI and the managing branch of ability EI, respectively

**Conclusions:** These results suggest that EI mindset training programs could be implemented and evaluated to explore their impact on the EI of female pre-service teachers

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## EPV0573

### Relationship Between Quality of Life and Academic Performance in a Sample of Colombian University Students

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**Introduction:** Quality of life encompasses a multidimensional component that includes aspects of lifestyle, health, housing, personal satisfactions, which can affect the academic performance of students in their university studies.

**Objectives:** To determine the relationship between the quality of life and academic performance of students at the National Institute

of Professional Technical Training “Humberto Velásquez García” in Ciénaga, Colombia.

**Methods:** Cross-sectional observational study involving a sample of 344 undergraduate students who completed the WHOQOL-BREF questionnaire, a sociodemographic form, and were asked about their academic performance in the last semester. Data were analyzed using RStudio, where categorical variables were interpreted through relative and absolute frequencies, and quantitative variables through medians. Bivariate analysis was conducted using non-parametric tests such as Mann-Whitney U and Kruskal-Wallis for group comparisons, and Kendall for correlations.

**Results:** Academic performance had a median of 4.00, and the quality of life had a median of 47.57. The Mann-Whitney U test showed  $p=0.03$  for gender-based performance comparison. Kruskal-Wallis comparison by age group regarding performance showed  $p=0.003$ . The correlation between academic performance and quality of life showed  $\tau=0.120$  and  $p=0.004$ .

**Conclusions:** The median academic performance is above the approval point, but the quality of life is below average levels (on a scale of 1 to 100). There are significant differences in median performance among gender and age groups, as well as a very low, positive, and statistically significant correlation between academic performance and levels of quality of life.

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## EPV0574

### Domestic and international medical students' need for mental health services

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**Introduction:** Heavy academic loads imposed on medical students explain why it is so important for a university to pay more attention to the issues of maintaining their students' mental health.

**Objectives:** To compare the level of mental health and the need for mental health services in domestic and international medical students

**Methods:** The survey covered 305 domestic and 241 international university students of the Faculty of Medicine. Their mental health level was measured with the SCL-90R questionnaire, their interest to mental health services - by means of a 5-point questionnaire.

**Results:** The data achieved by measuring the level of mental health with the SCL-90R revealed that in both groups this level is within standard limits. However, the international students showed a higher level of psychopathological distress reflected by GSI index ( $\chi^2=2.14$ ;  $p=.03$ ). Both groups have experienced a visit to a psychiatrist or psychotherapist (12.13% and 8.3% correspondingly). Some of them have undergone treatment in connection with their

emotional and behavioral problems (3.28% и 3.73%). Currently, they claim, with the same frequency, that they are in need of a psychiatrist's or psychotherapist's help (14.43% и 13.28%). Domestic students, as compared with international students show higher need ( $\chi^2=24.55$ ;  $p=.001$ ) for a psychologist's help (34.75% and 16.18%). With different frequency, 65.15% of the international students and 89.5% of the domestic students consider mental health services as necessary.

**Conclusions:** When providing medical support to medical students, it is important to take into account their need for mental health services and to keep in mind their different cultural backgrounds.

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## EPV0575

### How to manage work-related stress in healthcare professionals: organizational and individual interventions.

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**Introduction:** Workplaces can be source of significant stress for employees, leading to a series of mental health problems, such as burnout syndrome. Healthcare professionals and other helping professions are especially vulnerable to work-related stress.

**Objectives:** The aim of the present review is to assess available intervention aiming at improving work-related stress symptoms.

**Methods:** We conducted a thorough search of relevant articles on PubMed, APA PsycInfo, and Scopus databases, using specific keywords such as “occupational stress,” “stress,” “anxiety,” “depression,” “health personnel,” “health care facilities, manpower and services,” “prevention,” and “control.”

**Results:** Although significant methodological heterogeneity has been found among studies, regarding assessment tools, target population, and intervention types, we can still draw some satisfactory results. Healthcare professionals have access to various interventions to manage work-related stress symptoms, which can be classified into three categories: 1) individual cognitive-behavioral therapy approaches, 2) relaxation techniques at the individual level, and 3) organizational-level interventions. Mindfulness techniques, relaxation techniques, emotional freedom techniques, and integrated interventions have demonstrated effectiveness in alleviating work-related stress.

**Conclusions:** To prevent work-related stress among healthcare professionals, interventions should be targeted towards specific categories of healthcare workers based on factors such as age, tasks, and patient types. Well-structured and reliable randomized controlled trials focusing on the most promising interventions, such as mindfulness, need to be carried out in larger samples and with a solid methodology in order to confirm these evidences.

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