

## e-Poster viewing: Cultural psychiatry

EV0328

### Quality of life between two groups of psychiatric patients in Baghdad, Iraq

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**Objectives** To assess and compare the subjective rating of quality of life (QOL) in psychiatric patients who attended two psychiatric outpatient clinics in Baghdad city [Al-Rashad psychiatric teaching hospital and Baghdad teaching hospital]. In addition, it also aims at studying the effect of socio-demographic and clinical characteristics on the patients' life qualities.

**Method** A sample of one hundred patients divided equally into two groups (fifty patient) from each hospital were interviewed and diagnosed in accordance with the DSM-IV diagnostic criteria, for the period (from the 1st of March to the 1st of September 2011). The Arabic modified version of WHOQOL-BREF questionnaire (modified by WHO) was applied on each patient.

**Results** Data gathered from completed hundred forms showed that 50% of patients from Baghdad teaching hospital responded and scored (fair, acceptable) to describe their satisfaction in overall QOL, while (38%) of patients from Al-Rashad teaching mental hospital scored (bad) and (16%) scored (very bad). There was no significant difference in the four domains of QOL between the two studied groups. The findings were discussed accordingly.

**Conclusions** This study showed that although the overall satisfaction of the patients' life quality was higher in patients from Baghdad teaching hospital than those of Al-Rashad teaching mental hospital, a non-significant difference in the four domains between the two hospitals was found. The socio-demographic and clinical characteristics were not significantly correlated to the QOL domains except for the educational level, which was significantly correlated, with the physical health domain in patients from Al-Rashad teaching mental hospital.

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### Public perception of mental illness in Oman: A cross-sectional study

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**Introduction** Stigma toward mental illness is an international phenomena and it has negative consequences on the patients and their families. Studies on public attitudes toward people with mental illness (PWMI) in the Arab world initially reported less prevalence of stigma compared to other societies; however, follow up studies showed that stigma was influenced by specific socio-cultural factors.

**Aims** This study aims to examine public attitudes toward people with mental illness in Oman and the impact of socio-demographic factors.

**Methods** This is a cross-sectional survey conducted among the general public in Oman. The attitude was measured via the Attitude toward Mental Illness (AMI) questionnaire. Various demographic

factors were examined including age, place of residence, occupation and previous encounter with PWMI. The data were collected using online research methods.

**Results** A total of 601 subjects participated in this study, (M: 41.4%, F: 58.6%). 48% of the participants were aged 15–30 years while 46% were aged 31–45 years. The majority of the participants were employed and 10% were students. After adjusting for all other variables, subjects aged (15–30years) had less positive attitude compared to those aged (46–60 years) ( $P=0.06$ ). Socio-demographic factors such as gender, occupation and previous contact were correlated with the endorsement of positive attitudes toward PWMI.

**Conclusion** This study illustrated that public attitudes toward PWMI in Oman is generally sub-optimal. The observed attitudes were strongly influenced by age, gender, occupation and previous exposure to PWMI. Future studies with robust methodology are recommended to scrutinize the present findings.

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### The impact of shame and cultural beliefs on mental illness and treatment adherence: A case report

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**Introduction** Shame, especially when enmeshed in cultural beliefs about mental illness and cultural roles, could be a detrimental factor in psychiatric illness in context of adherence to treatment and continuation of care. Shame is defined as a painful experience which embodies multiple components including: collapse of self esteem, feeling of humiliation, rupture of self continuity, sense of isolation, and feeling of being watched by critical others.

**Objective** Understanding the psychodynamics of shame, in a particular cultural milieu and its components which could impact psychiatric treatment and care.

**Method** Here we present a case report of a 41-years-old Arab male patient from Yemen, with a history of paranoid schizophrenia who was admitted to inpatient psychiatric service for bizarre and aggressive behavior.

**Results** Initially the depth of patient's delusions and psychotic symptoms were not fully appreciated due to the cultural gap between the patient and the treatment team. He was then re-evaluated through the implementation of the cultural formulation interview (CFI) by clinicians from same cultural background. This team was able to elucidate the deep feelings of shame and inadequacy in patient's presentation and provide a culturally tailored treatment plan.

**Conclusions** Evaluation of psychiatric patients in a different cultural setting where western values do not apply might not be sufficient to assess the breadth of psychotic symptoms especially when an underlying feeling of shame contribute to presenting symptoms. Treatment of those patients with neuroleptics without assessing the cultural dynamics might result in poor adherence to medication and follow up.

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