

Introduction: From 2014 on, the rate of persons with a migration background in Germany rose steadily, in forensic psychiatric hospitals even disproportionately. Although daily work is aggravated through language barriers and cultural differences, general therapy processes have not been appropriately adapted yet and extensive research is lacking.

Objectives: Therefore the aim was to get a picture of the current situation of patients with a migration background in 11 Bavarian forensic psychiatry.

Methods: 237 Patients with a migration background (first or second generation) were asked about their sociocultural background, their acculturation tendency (by rating the Frankfurter Acculturation Scale), their German language ability and their estimation of the ward climate (by the Essen Climate Evaluation Schema).

Results: 51.8% of the participants were able speak German on an A-level, 13.1% on a B- level and 35.1% on a C- level. Patients of our sample oriented themselves more towards Germany and less towards their country of origin, compared to the control sample. Further, they experienced safety significantly lower and patient cohesion and mutual support higher than the forensic reference sample.

Conclusions: One possible explanation for the patients' orientation is the lack of possibilities to act out their cultural traditions. Because of the patients' limited German knowledge and cultural misunderstandings, they could feel less safe. To conclude, the group of patients with a migration background is important not solely due to its size. But its heterogeneity makes universally applicable statements not easy. Migration backgrounds have to be considered within the psychiatric setting and individual therapy plans have to be made.

Keywords: Migration background; acculturation; forensic psychiatry; language competence

EPP0679

Forensic psychiatry in the arctic – a comparative study of patient characteristics, health care system and legislation in greenland and nunavut.

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doi: 10.1192/j.eurpsy.2021.1007

Introduction: Greenland and the Canadian territory of Nunavut appear to have a different prevalence of forensic psychiatric patients, despite their comparable population and landmass sizes. Both are mainly inhabited by Inuit with a similar cultural and social background. Both have a universal health care system. They differ, however, concerning the supply of mental health services and legislation concerning forensic psychiatric patients.

Objectives: To compare the prevalence and clinical characteristics of forensic psychiatric patients in Greenland and Nunavut.

Methods: Data is obtained from health records, forensic psychiatric evaluations and court acts from all forensic psychiatric patients 18 years or older living in Greenland or admitted to the University Hospital Aarhus (N≈100). Data extracted from Nunavut Review Board hospital reports will be used to describe the patient population from Nunavut (N≈15). Patient characteristics include gender, age, marital status, education, diagnosis of mental illness, medical treatment, family history of mental illness and serious adverse childhood experiences. Public documents concerning health systems and legislation will be identified through literature search.

Results: Patient characteristics from the two patient populations, as well as visualizations of the differences and similarities between the respective health care and legislative systems will be presented at the conference.

Conclusions: This study provides a comprehensive clinical, socio-demographic and forensic comparison of the forensic psychiatric populations in Greenland and Nunavut, Canada. To our knowledge, it will be the first to describe and compare forensic psychiatric populations in the Arctic.

Keywords: Forensic; Arctic; psychiatry; International Comparison

EPP0682

A questionnaire to measure the quality of life in a forensic hospital

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doi: 10.1192/j.eurpsy.2021.1008

Introduction: Quality of life should be an important issue to everyone. In the general population and in various medical disciplines, this topic has been studied extensively. In forensic psychiatry, this topic has received little attention so far.

Objectives: Within this project a questionnaire that measures the quality of life in forensic hospitals was developed.

Methods: As a basis the questionnaire measuring the quality of prison life (MQPL) by Liebling et al. (2011), which was designed only for using in prisons, was used. First, this questionnaire was translated, then adapted to the living conditions in forensic hospitals and supplemented by questions regarding therapeutic support. For the psychometric evaluation of the instrument, a one-time survey was conducted at 13 forensic hospitals in Bavaria. A total of 255 patients took part, 25 of whom were female. In summary, the reliability of the MQPL can be rated as very good.

Results: The factor structure was checked with a confirmatory factor analysis and was confirmed. There are significant differences between the 13 Bavarian forensic hospitals in the subscales admission to a forensic hospital, equal treatment, quality of accommodation and therapeutic services.

Conclusions: The great importance of the quality of life in the penal system is shown by the fact that a good quality of life contributes to reduced psychological distress of inpatients.

Keywords: Forensic; quality of life