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Mental health staff: To promote resilience, to reduce the risk of burnout

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Introduction Stress and burnout are clearly problems for mental health workers. In this paper, we present data from research study on moderators of burnout in mental health staff.

Objectives/aims The purpose of this study was to explore the phenomenon of resilience as experienced by Russian mental health clinicians working in a highly demanding, specialized and stressful environment (e.g., staff shortages, health service shortages, not being notified of changes before they occurred).

Methods The study used a range of self report questionnaires. Measures included a demographic checklist, the Hardiness Survey (Maddi 1984), and the GCOS – The General Causality Orientation Scale (Deci & Ryan 1985). The participants for this study were drawn from Medico-rehabilitation Unit, Psychiatric hospital, – the disciplines of psychiatry, clinical psychology and nursing. In all, 10 ward based mental health professionals were surveyed.

Results This paper outlines the results of these measures. This in turn allows us to develop intervention strategy to ensure an effective provision, which depends on satisfied professionals, who have a sense of ownership over what they do and an ability to shape the direction of their endeavours.

Conclusions The study's findings have the potential to inform organizations in mental health to promote resilience in clinicians, to deliver stress management interventions for staff with the potential to reduce the risk of burnout and hence staff attrition, staff retention and mental health.

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Depressive and anxiety symptoms in youth mental health outpatients: An observational study

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Introduction There is an increased risk to develop mental disorder during adolescence and early adulthood. Given this vulnerability, and in order to facilitate the transition from child and adolescent to adult mental health services, specific services for this age group have been developed in the last years, focusing on accessibility and early referral of young mental patients. Our Psychiatry Department (Coimbra Hospital and University Centre, Portugal) created a specific unit for young adults in order to provide better care, in accordance with the specificities of this subpopulation. The team consists of psychiatrists, psychiatry residents, nurses and a clinical psychologist. Referred patients are under 20 years old, presenting clinically relevant psychopathology or behavior disturbances.

Objectives/aims We aimed to characterize help-seeking outpatients regarding socio-demographic variables and its relation to depressive and anxiety symptoms.

Methods Socio-demographic characterization was undertaken with young adult psychiatric outpatients observed during eleven months (1st January to 30th November 2015). Multivariate analyses were performed to identify a relationship among socio-demographic and psychopathology variables (assessed with the Portuguese version of Brief Symptom Inventory–53 items).

Results/conclusions One hundred and sixty-two outpatients were observed: 97 females (59.9%) and 65 males (40.1%), ages between 17 and 31 years old (average: 19.9; median: 20). We found a positive correlation between depressive and anxiety symptoms and the education level. A negative correlation was found between depressive and anxiety symptoms and male gender and presence of mental illness in the family.

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Factors related to disability pensions – a cross-sectional analysis from a university hospital in Istanbul

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Introduction Mental disorders are one of the leading reasons for disability-related retirement and payment of associated long-term benefits in many countries.

Objectives To explore the characteristics of psychiatric outpatients who apply for disability pensions and to investigate the factors associated with making an application.

Methods A four-month cross-sectional evaluation of disability pension and retirement applications to the psychiatry outpatient clinic in a university hospital in Istanbul.

Results The majority of 144 patients were male ($n = 102$, 70.8%), based in Istanbul, married, living with their families and had no occupation at the time of inquiry. Excluding applications for individuals with a diagnosis of intellectual disability ($n = 44$), most applicants were primary school graduates ($n = 31$, 32.3%). For the whole group, the median age of application was 34. 60%, ($n = 87$) had an established psychiatric diagnosis before the application, with average duration since diagnosis of approximately 8 years. The most frequent diagnoses were intellectual disability, followed by schizophrenia and depression. More than half of the patients were treated only outpatiently, with no hospitalization ($n = 55$, 58%). Thirty-two of them (22.4%) had a comorbid psychiatric diagnosis and 58 (40.3%) had at least one comorbid medical diagnosis.

Conclusions There are some similarities between our findings and findings from other countries, such as low educational level and frequent comorbid somatic diseases among patients applying for disability pension. In contrast with the literature and as an indicator of social inequality, most patients applied for disability pension were male. The results are reflecting the specificities of different health systems and cultural perceptions of disability.

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