even though they are more likely to be a victim of violence themselves. This attitude, reinforced by media coverage and observed also among health care workers, results in unwillingness to have any relations with mental patients due to fear of them being aggressive. Connection between physical well-being and mental health is well known. Physical therapists have necessary knowledge and skills to support development of individual independence, anxiety management and lifestyle control in order to keep patients healthier. It can be done by specially designed treatment programmes consisting of exercises, manual techniques and physical medicine procedures. Lack of understanding of this valuable connection results in insufficient emphasis on the presence of physiotherapist in the multidisciplinary therapeutic team on psychiatric wards nationwide. The study focuses on summary of the current situation in Poland and starts discussion on possible areas of improvements. Disclosure of interest The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2016.01.1788

EV804

Experience of burnout syndrome in resident physicians

P. Cigarroa-Vázquez¹, I. Vargas-Huicochea^{2,*}

- ¹ National Autonomous University of Mexico UNAM, Program of Masters in Mental Health, Mexico City, Mexico
- ² Instituto Nacional de Psiquiatría "Ramón de la Fuente Muñiz", Division of Clinical Research, Mexico City, Mexico
- * Corresponding author.

Medical residents, as a population that is in formation and that represents the workforce in public hospitals, are in a particularly vulnerable situation for the development of burnout syndrome (BOS), defined as a psychosocial disease in response to chronic stress in the work environment. This study analyzed the impact of BOS on a personal level, residents' ways of coping, and the perceived needs to prevent it.

Objectives To analyze the experience of BOS in medical residents of Mexico City.

Methods Qualitative design with a phenomenological approach. Semi-structured interviews were conducted. Participants were medical residents in training who agreed to participate. Data analysis was based meaning categorization and condensation, as well as some elements of discourse analysis.

Results We had interviews with residents of gynaecology, otorhinolaryngology, family medicine and psychiatry. We have found that there are some specific aspects that contribute to the development BOS:

- the hidden curriculum that has become evident through unnecessary punishments;
- various roles to be met simultaneously by residents;
- the basic needs like sleeping and eating right are not being met due to excessive workload.
- impact in general health.

Conclusions It is necessary to make visible the complexity of the BOS and its impact on trainees to prevent deterioration in the quality of life and overall health status. It would be to achieve the satisfaction of basic needs as essential conditions for physical and mental well-being of all human beings, and more so for those whose task is to contribute to the health of others.

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

http://dx.doi.org/10.1016/j.eurpsy.2016.01.1789

Mental health policies

EV805

Improving Ghana's mental health care through task shifting – psychiatrists and health policy directors views

V. Agyapong ^{1,*}, E. McAuliffe ², C. Farren ³

- ¹ University of Alberta, Department of Psychiatry, Fort McMurray, Canada
- ² University College Dublin, School of Nursing, Midwifery and Health Systems, Dublin, Ireland
- ³ University of Dublin, Trinity College, Department of Psychiatry, Dublin, Ireland
- * Corresponding author.

Background Currently, Ghana has only twelfth psychiatrists in active service providing for the mental health needs of a population of nearly 25 million people. Ghana has therefore adopted a system of task-shifting to address the critical shortage of psychiatrists.

Aim To examine the perception of psychiatrists and health policy directors about the government's policy to expand metal health care delivery in Ghana through a system of task-shifting from psychiatrists to community mental health workers (CMHWs).

Methods A self-administered semi-structured questionnaire was developed and administered to 11 psychiatrists and 29 health policy directors.

Results Only one psychiatrist and 3 (10.3%) health policy directors reported they were not aware of task-shifting within Ghana's mental health delivery system. Ten (91.1%) psychiatrists and 23 (79.3%) health policy directors were aware of a policy of the Government of Ghana to improve on the human resource base within mental health through a system task-shifting. Overall, 5 (45.5%) of the psychiatrists and 9 (31%) health policy directors perceived there are some resistance to the implementation of a policy of task shifting including resistance from traditional and spiritual healers, some psychiatrists, some community psychiatric nurses and psychologists. The majority of psychiatrists and health policy directors were of the view that CMHWs should be allowed to assess, diagnose and treat most of the common mental disorders.

Conclusion Psychiatrists and health policy directors in Ghana support Governments policy to expand on mental health care delivery through a system of task-shifting despite their knowledge of resistance from certain professionals.

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

http://dx.doi.org/10.1016/j.eurpsy.2016.01.1790

EV810

Mental health systems development in UAE

A. Haque

UAE University, Psychology and Counseling, Al-Ain, United Arab Emirates

Background This paper examines the historical development of mental health services in the UAE including formation of federal laws associated with mental health and ministerial decrees. It also discusses cultural considerations in mental health practice in a society that is highly pluralistic and populated mainly by foreigners. The sharia aspects of mental health are also addressed.

Aims The aims of the paper are to familiarize readers in above areas and encourage further work in the area of mental health in IJAE.

Methods The research is based on literature review.

Results All federal laws and ministerial decrees are listed and local cultural considerations and sharia laws discussed, as they are unique to his country and region.

Conclusion Although mental health is traditionally neglected in this country it is developing very fast and it is essential to keep track of and encourage such growth for the benefit of consumers and mental health professionals.

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

http://dx.doi.org/10.1016/j.eurpsy.2016.01.1795

EV811

How to relate two specific concepts: Sexual health and sexual minority?

F. Jurysta 1,2

¹ Centres Hospitaliers Jolimont asbl, Psychiatrie, Haine-Saint-Paul, Belgium

² ULB-Hôpital Erasme, Brussels, Belgium

Introduction WHO defines Sexual Health as "a state of physical, emotional, mental and social well-being in relation to sexuality... and requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence".

OCD-10 defines Transsexualism as "the desire to live and be accepted as a member of the opposite sex, usually accompanied by the wish to make his or her body as congruent as possible with the preferred sex through surgery and hormone treatment. The transsexual identity has been present persistently for at least two years. The disorder is not a symptom of another mental disorder or a chromosomal abnormality".

Objective We developed an integrative model in 4 axes to approach Sexual Health concept and Transsexualism.

Aims Holistic and integrative model of transsexualism gives a better understanding of this disorder and ameliorates global treatment. Moreover, this model should be applied to each sexual minority.

Results 1. Etiology integrates psychological, biological and neuro-developmental aspects. 2. Clinical features for treatment imply large and multidisciplinary approach. 3. Scientific literature includes more than thousand papers on Transsexualism and numerous expertises as endocrinology, psychiatry, cardiology, sleep... 4. Social networks are developed in hospitals, associations... as well as between patients themselves.

Conclusions Holistic and integrative approach of Sexual Minority as Transsexualism could reach Sexual Health concept defined by WHO.

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

http://dx.doi.org/10.1016/j.eurpsy.2016.01.1796

EV813

The Portuguese mental health law – The criteria for compulsory internment

H. Prata-Ribeiro Coimbra, Portugal

The Portuguese Mental Health Law is complex, aiming to ensure patients liberties and basic civil rights are respected. A specific part of this law regards the compulsory internment and its criteria, being as protective as possible, in order to prevent wrongful internments for people against their will.

The aim of this study is to analyze the mechanisms available to ensure liberty, in a law apparently about coercion.

The methods used consisted in analyzing the law and interpreting its most important details, mentioning them so they can be read and used as examples.

It can be concluded that the Portuguese law has a very strict list of mandatory criteria for the possibility of the compulsory internment, as a way of ensuring no people suffer it wrongfully. The most important being that no person can be interned compulsory if not considered to suffer from a severe mental disease, not being that enough and having to at least present risk for themselves or others, or to juridical goods of high value. Thus, revaluation of the patient is mandatory only five days after the internment by two different doctors, being the same process assured from then on every two months. Only possible flaw lays on the fact that there is no maximum amount of time predicted for internment, being that always dependent of the revaluations made. Although, the law is considered to be good and prevent abusive use of the compulsory internments.

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

http://dx.doi.org/10.1016/j.eurpsy.2016.01.1798

EV814

Preliminary evaluation of the Italian version of the INSPIRE measure of staff support for personal recovery

N. Ratti ^{1, *}, B. Mattioli [†], L. Mellini ¹, I. Negri ², A. Mastrocola ¹

¹ AUSL Romagna, Dipartimento di Salute Mentale, DSMDP, Ravenna, Italy

² Università di Bologna, Dipartimento di Psicologia, Bologna, Italy

* Corresponding author.

Introduction Supporting personal recovery has become the main aim for mental health services in many countries nowadays. In particular, the relationship between individual service users and staff members can be the key issue in supporting recovery and this requires specific measures in order to identify and evaluate the orientation of services in this process of change. INSPIRE is a standardized questionnaire developed by King's College, London that represents a service user-rated measure of staff support for personal recovery in the UK.

Objective Although there is a number of instruments aimed at monitoring recovery in the clinical and functional features, there is still lack of measures for personal recovery and recovery orientation of services in the Italian background.

Aims The aim of this study is to evaluate the psychometric properties of the Italian version of INSPIRE as it is applied in the Italian mental health services.

Methods Two rounds of data were collected from a sample of 79 inpatients and outpatients of rehabilitation centers and consultant service of the municipality of Ravenna. Analysis was undertaken using SPSS. The main issues investigated were internal consistency, test-retest reliability and exploratory factor analysis.

Results The results in the present studies indicate that the Italian version of the INSPIRE measure had a very good internal consistency and a satisfactory test-retest reliability.

Conclusions While further studies testing the instrument in larger and more diverse clinical contexts are needed, INSPIRE can be considered a relevant and feasible instrument to use in supporting the development of a recovery-oriented system in Italy.

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

http://dx.doi.org/10.1016/j.eurpsy.2016.01.1799