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Conclusion. The phenomenological model developed produces a fuller picture of the association between psychosis and violence. As such it may generate insight into the association between psychosis and violence that has greater clinical utility than existing psychopathology-based theories do. This needs to be evaluated by field testing of the approach.

Gross Bimodal Diurnality in Dementia Behavioural Symptoms in an Inpatient Setting: High Noon and Sundown

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Aims. Our purpose-built dementia unit investigates temperature and Behavioural and Psychological Symptoms of Dementia (BPSD). We sought to control for diurnality. Sundown Syndrome (SS) is emergence or worsening of BPSD in the late afternoon or early evening. The literature affords debate. Our methods of controlling for time as a confounder for temperature generated contributions which we offer here.

Methods. Data were collected from two Older People's Organic wards within the Cumbria, Northumberland Tyne and Wear NHS Foundation Trust. Collection used the Trust's "Talk First" data system. That is an established, verified record, including "aggression" (non-contact) or "violence" (contact). Data from 16 months, September 2019 to January 2021 were analysed.

Patients had moderate or severe dementia. Wards care for a maximum of 14 patients and serve either men or women. Data for the communal corridor and day room of each ward were analysed. This gave four site

We used two methods. The first was basic, the overall histogram of incidents through the day.

The second analysis counts "incident signals" from each time or temperature. Each actual occurring combination of temperature and time is assigned a "cell". The background rate of all incidents per all cells is known. Any incident in any rare cell has low binomial probability. Low probabilities mean high "signal". The square of sums of signals across each hour provides each hour's "incident signal".

Results. Median ages were 79 (women) and 82 (men). There were 99 incidents.

The histogram has two peaks, around lunchtime and evening. Late afternoon is relatively safe. Thermal incident signals are summarised as moderately coherent. Diurnal incident signals controlling for temperature did not show any coherent trend.

Conclusion. We proffer approaches for controlling for temperature and time of day. The project has limits. We have a small sample. We have not compared sunset times; but that is not relevant to the mid-day peak. We present secondary data from an evaluation aimed at temperature. More favourably this is an a priori sample, shows the same thing is two ways, and adds to debate on an important and critiqued construct. Though SS uses "sun" as a shorthand, any effect will be mediated bio-psychosocially via light, social interaction, heat, circadian rhythms, etc. Our data support social interaction more than time of day. This may add to or challenge SS as a construct.

The Correlation Between Parenting Styles and Self-Esteem of Medical Students: A Cross-Sectional Study

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Aims. Among various factors that determine an individual's self-esteem, parenting styles play a very significant role in this regard. Certain parenting styles that are practiced around the globe include authoritarian, authoritative and permissive parenting. The study aimed to investigate the co-relation between parenting styles and self-esteem among medical students.

Methods. A cross-sectional study was conducted among the MBBS students of Rawalpindi Medical University, Rawalpindi from December 2020 to March 2021. 255 students took part in this study. An online survey was prepared by using Parental Authority Questionnaire-Short Version and Rosenberg Self-Esteem Scale and students were asked to fill it. Simple Random sampling technique was applied. SPSS version 26.0 was used to enter and analyze data. Pearson Correlation, Logistic regression and Hierarchal regression analysis were applied.

Results. Out of 230, 60% of the sample population experienced authoritative, 29% experienced authoritarian whereas 11% experienced permissive style of parenting. Authoritative (r = 0.283, p < 0.001) and authoritarian (r = -0.227, p < 0.001) parenting styles were significantly correlated with self-esteem. Authoritarian parenting style (AOR = 2.20, 95% CI: 1.17, 4.14) was significantly associated with self-esteem of the participants compared to authoritative parenting style.

Conclusion. Results indicated that authoritative parenting was only parenting style that correlates positively with self-esteem which suggest authoritative parenting is the optimum parenting style in Pakistani culture.

Association of Social Anxiety Disorder and Physical Activity With Psychological Distress During COVID-19 Imposed Lockdown: A Medical Student Survey From a Developing Country

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Aims. COVID-19 imposed lockdowns have impacted the mental health of medical students worldwide. However, the relationship of social anxiety disorder with psychological distress during the pandemic has not been studied. The objective of this study was to assess the association of social anxiety disorder and physical activity with psychological distress in medical students during COVID-19 imposed lockdown.

Methods. 256 medical students (M/F: 144/112) took part in this online cross-sectional survey conducted in September 2020 during a government imposed lockdown. Kessler-10 (K10) questionnaire, social interaction anxiety scale (SIAS) and international physical activity questionnaire (IPAQ) - short form were used

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to assess psychological distress, social anxiety and physical activity, respectively. Data were analysed using SPSS v25, with application of multivariate logistic regression to assess association of various factors with psychological distress.

Results. Out of 256 medical students, 73 (28.5%) had severe psychological distress and 105 (41.0%) had mild to moderate distress. A logistic regression model to assess the effect of social anxiety disorder, level of physical activity and gender with the likelihood of having severe psychological distress was statistically significant (p < 0.001) with overall accuracy of 73.8%. The risk of developing severe psychological distress was higher among females [OR 2.13 (95% CI 1.17–3.87), p = 0.013] and those with social anxiety disorder [OR 4.56 (95% CI 2.27–9.16), p < 0.001]. Low physical activity was not a significant risk factor for psychological distress [OR 0.88 (95% CI 0.35–2.23), p = 0.794].

Conclusion. This study shows that COVID-19 imposed lockdown has adversely affected the mental health of medical students. Female students and those with social anxiety disorder are at more risk of developing severe psychological distress.

A Feasibility Evaluation of Discovery Group: Determining the Acceptability and Potential Outcomes of a Patient-led Research Group in a Secure Mental Health Inpatient setting

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Aims. Patient and public involvement and engagement (PPIE) is recognised as an essential part of health research. It provides an opportunity for patients to shape health research and acquire research skills, in the inpatient mental health setting, PPIE may have additional value in providing meaningful activity and enhancing recovery, as defined using connectedness, hope, identity, meaning and empowerment (CHIME) principles. An eight -session PPIE programme ("Discovery Group") was designed to support patient-led research in a secure mental health hospital. This feasibility study aims to evaluate the acceptability of the programme from the perspective of patients and identify potential outcomes.

Methods. A retrospective single-arm post-programme evaluation of Discovery Group was undertaken. Participants attended an evaluation workshop where they were interviewed individually to complete an acceptability questionnaire designed using the domains of the Theoretical Framework of Acceptability. Participants also completed an outcomes questionnaire, which included CHIME-based recovery items. Quantitative data were analysed descriptively. Direct content analysis was applied to qualitative data.

Results. In our sample, eight participants attended at least one session of the discovery group with one patient attending all sessions. Most of the participants felt positive about taking part in the group and expressed interest in joining another group in future. All participants experienced some burden from the effort required during group sessions, but a low level of opportunity cost in terms of the extent to which they perceived they had to forfeit benefits to participate in the programme. Some described the group as effective in helping them learn about research. Of the five CHIME recovery domains, only connectedness was reported as a benefit of the group. The participants valued the opportunity to use their time.

Conclusion. Discovery Group is a novel intervention that offers high level, non-tokenistic PPIE suitable for use in secure mental health inpatient settings. It produces research of value to patients through a programme of high acceptability and provides them with potential benefits of recovery as well as research knowledge and skills, and an activity that alleviates boredom, enhances autonomy, breaks down some important power and paternalistic barriers that can be experienced by patients detained in secure mental health settings. Finally, a future evaluation study that involves patients during the design, implementation, evaluation and writing stages, aiming to measure the potential outcomes identified in the present study using pre- and post-testing with a control group would reliably demonstrate the effectiveness of the revised Discovery Group and ensure meaningful involvement with patients as co-researchers.

'Sheldon' in the Medical Field: Emotional Intelligence and Its Associated Factors in Medical Students of Pakistan

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Aims. The dearth of emotional intelligence leads to medical students' inability to handle the pressures of medical education, subsequently causing burnout and mental illnesses. Poor emotional intelligence in young doctors also begets increased mistrust from the public, lowering the quality of healthcare delivery. Emotional intelligence of Pakistani students, similar to global context, is impacted by a myriad of psycho-socio-economic factors. It is pertinent to find out the detrimental and/or protective factors, and design interventions to enhance emotional intelligence as a soft skill. With this aim in mind, we explored the relationship of emotional intelligence with adverse childhood experiences and prevalent mental illnesses (depression and anxiety) amongst the medical students of one of the most populous cities of Pakistan; Lahore.

Methods. A cross-sectional study was conducted including currently enrolled MBBS (Bachelor of Medicine and Surgery) students from first year to final year in 2 medical schools of Lahore. An online google form was constructed by combining Modified Adverse Childhood Experiences Score Scale (ACES), Brief Emotional Intelligence Scale (BEIS-10) and Hospital Depression and Anxiety Scale (HADS). Data were exported to SPSS version 25.0 for descriptive and analytical analysis. Pearson's chi-square analysis and logistic regression analysis were used to study the association between the outcome and dependent variables; Odd's ratio (OR) with 95% Confidence Intervals (CI) were calculated.

Results. Participants (N = 324) belonging to two different medical colleges in Lahore, namely King Edward Medical College (public) and Shalamar Medical and Dental College (private), took part in the study.

Pearson's chi-square showed significant association of emotional intelligence with early private schooling (p = 0.029), nuclear family system (0.044) and the presence of symptoms of depression (0.005). The adjusted logistic regression model showed that people who studied in a private sector school (OR: 2.12, CI: 1.01–4.45) and people who lived in a nuclear family (OR: 2.02, CI: 1.00–4.08) had significantly twice the likelihood of having high emotional intelligence. Also noteworthy is that respondents who