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Methods: I contacted someone in the mental health information office at Royal College of Psychiatrist and expressed my interest to help the college by contributing one more language to the college website which will be my native language SINDHI. As I wanted to translate leaflets of Royal College about various common mental health disorders in SINDHI language which would benefit more than 50 million people across the world. As they would be able to read about common mental health disorders in their own language which will help them to understand that conditions in a better way and will reduce the stigma and will encourage them to get the right help which they need and deserve.

We started working together on the project and agreed that I will do writing and he will do proof reading for it. We completed the project and handed back it over to the college representatives dealing with leaflets in other languages. After about one month's hard work, we were lucky enough to get out a leaflet translation published by Royal College of Psychiatrist. It was a proud moment for me being a psychiatrist to help me patients and being a SINDHI to be able to get my mother tongue published on Royal College website. I couldn't have asked for more. It's not the end of this story, as we will continue to work with our college to translate more leaflets and contribute to society and to the college being a proud member of Royal College of Psychiatrist UK.

Results: It was published on RCPSYCH website in translation section I contributed one more language to RCPSYCH website through my work

Conclusions: MY TRANSLATION WORK WAS PUBLISHED ON OFFICIAL WEBSITE OF ROYAL COLLEGE OF PSYCHIATRIST UK

IT WAS WIDELY APPRECIATED BY WIDER COMMUNITY AND CURRENT AND EX DEAN OF ROYAL COLLEGE OF PSYCHIATRIST <https://www.rcpsych.ac.uk/mental-health/translations/sindhi/depression-sindhi>

Disclosure of Interest: None Declared

EPV0399

Ultra-Orthodox women in the job market: What aid them to become healthy and satisfied?

O. Braun-Lewensohn^{1*}, T. Kalagy² and S. Abu-Kaf¹

¹Conflict Management & Resolution Program and ²Department of Public Policy & Administration, Ben-Gurion University of the Negev, Beer-Sheva, Israel

*Corresponding author.

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Introduction: Culture and ethnicity are crucial to our identity and responsible for our health, values and thereby to our satisfaction from work.

Objectives: To this end, this study focused on the minority groups of ultra-orthodox women in their work sphere and examined differences between women who work within the enclave, women who work both with ultra-Orthodox and other sectors of the Israel society and women who work mainly outside the ultra-Orthodox enclave on the different study variables. Moreover, a model which include main resources [family, community, diversity climate perceptions (in the job environment) and inclusive leadership] as potential explanatory factors of employees' satisfaction from work and mental health.

Methods: Data were gathered from 304 ultra-Orthodox women who belong to various streams in this society, who were recruited by the Midgam research panel. The participants filled out self-reported questionnaires among which family quality of life, community sense of coherence, diversity climate, inclusive leadership, job satisfaction and mental health. The participants' age ranged between 19-64 years (M=30.86 SD=8.71).

Results: The explanation of the full model for jobs satisfaction was: 46% of the variance among women within the enclave, 60% among women who work in mixed environment, and 53% among women who work outside the enclave. As for mental health: 22% of the variance among women within the enclave, 17% among women in mixed environment, and 41% among women outside the enclave.

Conclusions: The results are analyzed through the lens of Bronfenbrenner's ecological theory and show that in traditional societies such as the ultra-Orthodox one, the most important factors for job satisfaction and mental health are family and communal resources.

Disclosure of Interest: None Declared

EPV0400

How cultural factors along with mental health diagnoses influence the treatment of a stroke patient with no previous mental health history: a case report

P. Setián Preciados*, E. Arroyo Sánchez, A. Sanz Giancola, I. Romero Gerechter and M. Martín Velasco

Psychiatry, Hospital Universitario Príncipe de Asturias, Alcalá de Henares, Spain

*Corresponding author.

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Introduction: Mental health awareness campaigns in the past few years have vastly improved how medical professionals treat mental health patients. However, prejudices and ignorance still interfere in medical practice. In this context, with the case presented we can see that even in presumed mental health diagnoses along with cultural factors (race, language...), the best medical assistance is not ensured.

Objectives: Review how different intersectional factors can determine the treatment patients receive at hospitals.

Methods: Presentation of a patient's case and review of existing literature, in regards to the influence of race, language barriers and mental health diagnoses when attending patients.

Results: The patient is presumed to suffer from a mental health condition after a battery of initial tests with inconclusive results do not demonstrate an organic origin. Instead of continuing with the medical study, the patient is disregarded as psychiatric even though his profile doesn't fit beforehand of a fictitious or conversion disorder. The fact that there are also cultural factors in play (race

and language) probably unconsciously influence how the medical team treats this patient's case. Cultural social factors persistently present as barriers in clinical practice.

Conclusions: Race, language barriers and mental health diagnoses as well as other intersectional factors do have a great impact in the treatment patients receive. There is yet a lot to do when it comes to educating health professionals if we want to offer the best medical assistance.

Disclosure of Interest: None Declared

EPV0401

Psychopathology without Borders: Transcultural psychiatry and implications in clinical presentation and practice

S. Jesus*, A. R. Costa, G. Simões, A. I. Gomes, A. Tarelho and P. Garrido

Departamento de Psiquiatria e Saúde Mental, Centro Hospitalar do Baixo Vouga, Aveiro, Portugal

*Corresponding author.

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Introduction: Existing as an emerging topic in the field and undergoing constant evolution, Transcultural Psychiatry addresses how social and cultural factors influence mental illness. During the second half of the twentieth century, phenomena such as globalization, massive migrations and immigration, occurring in ever increasing frequency, continue to bring this topic to the forefront of discussion as challenges in the treatment of patients from varying cultural backgrounds emerge. Viewed from the biopsychosocial perspective, culture delineates a framework for the evaluation of various expressions of emotion and behaviour as well as defining the limits of what counts as disorder. As border restrictions are lifted, cases which present with these particularities are bound to increase, necessitating an increased attention to the influence that cultural and social factors play in the psychopathological clinical pictures which may present to the practitioner.

Objectives: The authors aim to briefly explore the concept of transcultural psychiatry and its importance in clinical presentation and practice with recourse to various clinical cases of international patients hospitalized in a Portuguese Psychiatry ward during a two-year period.

Methods: A brief non-systematized literature review was performed based on works most pertinent to the topic discussed. As a compliment to the topic, a discussion of various clinical cases of hospitalized international patients is presented.

Results: Culture has been demonstrated to contribute to psychopathological presentations in a variety of forms, solidifying the old adage that 'no man is an island' and giving reason to the biopsychosocial approach applied in clinical practice. The impact of sociocultural factors is such that the DSM-5-TR includes in its classification culture-specific syndromes. The cases discussed demonstrate the various nuances necessary not only in exploring psychopathology, but also in implementing appropriate standards of care.

Conclusions: Transcultural psychiatry rises as a relatively recent topic as well as raising important philosophical, theoretical and technical challenges for mental health practitioners. Although existing as a subspecialty, each mental health practitioner should strive to be transcultural, taking into consideration the influence

that these factors exert on mental illness. The patient should be evaluated with consideration to their cultural background, as well as not neglecting how the culture of the practitioner may influence the interpretation of psychopathological presentation.

Disclosure of Interest: None Declared

EPV0402

Diagnostic delay in mental Experience of the psychiatric hospital Arrazi Salé Morocco

S. Bahetta^{1,2*} and N. elmoussaoui²

¹Psychiatry, CHU RABAT SALE and ²Psychiatry, Arrazi Psychiatric university hospital, Salé, Morocco

*Corresponding author.

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Introduction: Mental illness is characterized by a major emotional, cognitive, and or behavioral impairment of an individual. It is usually accompanied by distress or functional impairments in important areas.

Mental illness affects 48.9% of the Moroccan population. This makes it a major public health issue but one that is still unrecognized and underestimated in the general population. Because of certain cultural aspects considering mental illness as a taboo or privileging traditional healing.

Objectives: to evaluate the time between the initial symptomatology and the first psychiatric consultation Identify the course of action to be taken in the face of the first symptoms of the illness; Determine the factors responsible for the diagnostic delay;

Methods: We conducted a cross-sectional study to assess the duration between initial symptoms and diagnosis and to identify the responsible factors of diagnostic delay. This study included 200 patients followed at the psychiatry department of the University Hospital Arrazi of Salé, and evaluated by an hetero questionnaire.

Results: The average age of our patients was 29 years, male gender was predominant (84%). The mean diagnostic delay was 46 months. Data analysis showed some significant results: - The Diagnostic delay was longer in male patients. - The diagnostic delay conditioned response to treatment and therefore the prognosis.

Conclusions: In conclusion, public awareness of psychiatric problems, treatment availability, and educational efforts to overcome the social stigma are essential to reduce diagnostic delay and improve the prognosis of schizophrenia.

Disclosure of Interest: None Declared

EPV0403

MIGRATION, PERCEIVED DISCRIMINATION AND THE DEVELOPMENT OF PSYCHOSIS

V. Barata*, J. Bastos, C. Cativo and P. Gonçalves

Psychiatry, Hospital Prof. Dr. Fernando Fonseca, Lisboa, Portugal

*Corresponding author.

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Introduction: Migration is a rapidly growing phenomenon in European countries and its association with psychotic disorders is a public health concern. Psychosis is more prevalent among