S660 e-Poster Viewing

**Introduction:** Anticipation is the most valuable component of the regulatory side of human behavior. Adolescence is a sensitive period in relation to the formation of an anticipatory and prognostic system, which in turn provides an opportunity to assess causal relationships and evaluate the consequences of actions taken.

**Objectives:** Study of the anticipatory viability of adolescents with long-term disorders in the prevention of deviations.

**Methods:** The study involved 46 adolescents aged 11-15 studying at a specialized boarding school for children with disabilities. The observational method was used as well as the author's methodology "Studying the anticipatory solvency of adolescents" Akhmetzyanova A.I., Artemyeva T.V.; "Diagnostic questionnaire for identifying propensity to various forms of deviant behavior for students of educational institutions" developed by the Department of Psychiatry of the Military Medical Academy named after S.M. Kirov.

**Results:** The subjects had difficulty predicting the passage of time, with its adequate and rational distribution, including planning their own activities. Adolescents with musculoskeletal disorders had difficulty making a pragmatic and realistic forecast of possible events in communication with other people, as well as predicting the emotional states of interaction participants. Adolescents with movement disorders were characterized by an inadequate assessment of themselves as a subject of professional activity, fixation on the movement disorder, and high levels of anxiety and neuroticism. The subjects showed a tendency to suicidal behavior due to risk factors such as high levels of anxiety associated with self-esteem and anxiety in interpersonal relationships, high affectivity and demonstrativeness, social pessimism and negative prediction of the future. During the correlation analysis, the relationship between spatio-temporal and speech-communicative anticipatory consistency with indicators of deviant behavior - delinquent behavior and deviant behavior was revealed.

**Conclusions:** The data obtained in the study will allow specialists to timely identify and prevent the development of deviant behavior, as well as build a route for correctional classes with each child. This paper has been supported by the Kazan Federal University Strategic Academic Leadership Program.

**Disclosure of Interest:** None Declared

#### Philosophy and Psychiatry

#### **EPV0728**

## Mental disorders: exploring normality models to distinguish what is normal from what is illness

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**Introduction:** When reading about psychopathology what we find described are experiences similar to our own. Psychiatry deals with anguish, fear, motivation, choice, and many other aspects that makes us human. However, even though psychopathology is rooted in common human experience, mental disorders are often outside the experience of those who don't suffer from it. Therefore, the distinction between normality and disease is central to psychiatry.

The DSM proposes that mental disorders are necessarily linked to distress and/or impairment. However, it adds that the syndrome or pattern must not be an expectable response to an event - it excludes "normal" experiences and responses from the realm of mental illness. But how do we distinguish normal distress from illness? This review investigates how different meanings of normality can help us discern the fine line between mental illness and ordinary human experience.

**Objectives:** We intend to critically examine and compare different models of normality. Additionally, we seek to discern the implications of these models for distinguishing mental disorders from normal mental experiences.

Methods: Review of the literature.

Results: We analyzed definitions and models of normality throughout the literature and selected the most relevant ones according to their popularity and/or strength of argument. Different models of normality (e.g. Biostatistical, Process, Health, Ideal, Biological advantage, etc.) were examined and compared, and the conceptualization of mental disorder was examined through the lens of each of these frameworks. Our investigation reveals the multifaceted nature of normality, with different models offering unique perspectives on mental health. From statistical approaches to cultural considerations, each model contributes distinct criteria for distinguishing what is normal from what is illness. By synthesizing these results, we gain a comprehensive view of the factors influencing the conceptualization of normality in the context of mental health.

Conclusions: This review emphasizes the importance of adopting a nuanced, cautious and multifactorial approach when discerning mental disorders from normal experiences. Rather than relying on a singular definition, our analysis suggests that a comprehensive understanding of normality can help us to better discern what is normal and what is illness.

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#### **EPV0729**

#### Phenomenology or constructivism in psychopathology

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**Introduction:** Phenomenology is historically fundamental for psychopathology. In recent decades constructivist approaches occur as an alternative. Some consider them quite compatible, others take the reverse stance, arguing for advances of one or the other. This has parallel in discussions and contradictions in philosophy of mind. **Objectives:** As Dennett points, there is no science free of philosophy, so it is recommendable to make clear and bear in mind on what kind of philosophy is based contemporary psychopathology.

**Methods:** Brief review and comparison between phenomenological and constructivist approaches.

**Results:** There is no doubt, that culture influences self and experience. Culture and social environment shape abnormal experiences as well. In an extreme variant a constructivist statement would sound as "Someone suffers from a disorder because a violation of social norms." The self is considered as socially constructed entirely, in the spirit of Mead. Psychopathological theories are

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function of societal development as well. Phenomenological approach pays attention to constitution and structure of subjective experience. The self has a multilayer structure with a pre-reflexive experiential level of self. Elements of subjective reality do exist, that are not result from social influence, these include abnormal experiences. Especially some experiences in severe mental illness originate from profound disturbance of intentionality based on dysfunction of pre-reflexive self-awareness as it shown by T. Fuchs.

**Conclusions:** Phenomenology offers more broad and satisfying framework for psychopathology and psychiatry. Contribution of constructivism is not to be ignored, but seems to be one-sided. Further research and deeper education in phenomenological psychopathology of trainees would be valuable.

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#### **EPV0730**

### The Reductions in Phenomenology - A Comparison Across Main Authors

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**Introduction:** Phenomenology is one of the fundamental tools in the clinical practice of psychiatrists, constituting one of the touchstones regarding the diagnostic framework in which clinicians navigate.

For Husserl, Phenomenology provided access to the structure of pure consciousness, experience and existence. These are conditions of possibility for the object of Psychiatry, ontologically prior to it. Thus, clarification of the object and method of Phenomenology is preliminary to understanding the object of Psychiatry.

Phenomenology, being a direct tributary of Philosophy, evolves dialectically, constantly dialoguing with its predecessors. While it is taken as a philosophical current, it is also considered a method. It is precisely as a method that we can see how the methodology changes in different phenomenological traditions.

**Objectives:** To compare how the main phenomenological traditions operate.

**Methods:** Comparative analysis between the phenomenological reductions in key figures of the phenomenological tradition, resorting to the corpus of the *Husserliana*, *Being and Time*, *Phenomenology of Perception* and *General Psychopathology*. Additionally, a nonsystematic literature review of papers on the database Philpapers, using the keywords "critical phenomenology", "eidetic reduction", "phenomenological reduction".

**Results:** While there is a multiplicity of ways of taxonomizing phenomenological currents, we divide it in: pure, existential, embodied, jasperian, psychopathological, and critical.

Husserl's pure phenomenology uses the free variation in phantasy and *epoché* as operators, starting from the natural attitude.

Heidegger's existential phenomenology makes no reference to a reduction of any kind. For him, it is necessary to take a step back, to a more primordial mode of being through which we can access Being, where the world is given and constituted.

Embodied phenomenology, of Merleaupontinian provenance, recognizes the reduction, but cannot be fully achieve it.

Jasperian phenomenology uses empathy and co-experience as its operators, through which it gains access to the subjective states of the other, with the aim of systematizing and taxonomizing subjective phenomena.

Phenomenological psychopathology tentatively uses Husserlian reductions to identify the a priori structures of the human, be it Biswanger's forms of manifestation of failed human existence or Blakenburg's anthropological disproportions.

Critical phenomenology uses a historical-transcendental analysis of experience as its operator, through which it accesses transcendental intersubjectivity.

**Conclusions:** At a time when the DSM and ICD are increasingly seen as inadequate, limited and dogmatic, the resurgence of interest in Phenomenology is evident. It is important to avoid falling back on new presuppositions without constant revision and questioning, at the risk of simply mutating dogmas and missing the original legacy of pure phenomenology, the suspension of presuppositions.

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#### **EPV0732**

# Achieving self-awareness through film screening "Twin Peaks" By D. Lynch as an example of mindfulness meditation

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**Introduction:** Transcendental cinema, distinguished from slow cinema by Paul Schreader, draws on the philosophy of existentialism and depicts the complexity of the human psyche using psychoanalytic tools. We claim that through the use of special procedures, the projection of transcendental cinema essentially becomes a meditation session in the spirit of mindfulness, which has been proven to alleviate and cure more than just neuropsychiatric ailments.

**Objectives:** The purpose of this work is to demonstrate the similarity between mindfulness philosophy and transcendental cinema. We believe that the assumptions of both currents are so similar that we can treat the film screening in the category of a meditation session. Thus, we arrive at a situation in which we not only watch the protagonist developing his own consciousness in accordance with the mindfulness philosophy (also following the path of psychoanalysis), but also we, as viewers, develop self-awareness.

**Methods:** We analyze D. Lynch's Twin Peaks series in accordance with Paul Schrader's understanding of 'transcendental cinema'. In addition, we use the scientific achievements of classical psychoanalysts, analyzing the metaphysical world of the characters in accordance with this trend. Using J. Kabat Zinn's scientific publications, we analyze cinema in terms of a meditation session.

**Results:** Participation is crucial; in meditation and in the transcendental cinema. Mindfulness means focusing on the emotions and feelings experienced at a given moment, on what comes to us, what we experience. Transcendental cinema using specific formal and