

their thoughts and insights on improving psychotherapy training in Pakistan.

Results. Out of the 41 responses received, the majority were female respondents, totalling 27 (65%). All participants were FCPS trainees at various stages of their training, hailing from ten different cities across Pakistan. Findings indicated that 61% of respondents reported insufficient time to learn, understand, and apply psychotherapy techniques, while 53% identified a deficiency in supervision.

In terms of therapeutic exposure, a predominant 34 participants (82%) encountered Cognitive Behavioural Therapy during their training. Mindfulness, Dialectical Behaviour Therapy, and Family Therapy each were reported by 12 respondents (30%). Interestingly, 34 of the respondents (82%) noted an increased interest in psychotherapy since starting their psychiatric training. However, only 20 respondents (48%), felt confident in delivering psychotherapy independently.

A recurring theme emerged from the feedback: participants advocated for a more structured psychotherapy training program, emphasising the need for dedicated time specifically allocated for supervision and practical learning opportunities.

Conclusion. This survey highlights that FCPS Psychiatry Residents in Pakistan are keen to learn more about psychotherapy. However, identified shortcomings in delivery, structure, and supervision suggest a need for comprehensive reforms. The findings emphasise on refining the psychotherapy training in low- and middle-income countries.

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Oxford-Based Clinically Relevant Interview Skills in Psychiatry Course (Ox-CRISP)

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doi: 10.1192/bjo.2024.277

Aims. Ox-CRISP is an innovative trainee-led course using Near-Peer teaching, designed to empower new junior doctors in psychiatry to enhance their diagnostic and communication skills. The course provides patient centered simulation scenarios around interview skills in Psychiatry aiming to improve patient safety, boost confidence of junior doctors and promote effective clinical strategies. The curriculum covers a wide range of topics, including mood disorders, psychotic disorders, anxiety disorders, personality disorder, intellectual disability including CAMHS, old age psychiatry, and substance use disorders.

Methods.

- Curriculum Content: Covers 9 prevalent psychiatric scenarios.
- Teaching Strategy: Evidence-based, co-produced with experts by experience.
- Teaching Approach: Near-peer teaching for safe, supportive learning.
- Assessment: Pre- and post-course questionnaires to track learner progress.
- Implementation: Offered to junior doctors in Psychiatry at Oxford Health NHS Foundation Trust's Medical Education department.

Results. The qualitative data showed that the course, run through multiple sessions, resulted in improved confidence & competence

of trainees in clinical practice, positive impact on trainers & trainees, and enhanced well-being of junior doctors. The cope of impact affected patient care across two counties in South-East England.

Conclusion. To our knowledge, this is a unique course of its kind in the UK. The OxCRISP course represents an innovative and effective approach to mental health education that provides learners with the skills and knowledge they need to provide high-quality patient care. The success of the OxCRISP course demonstrates the value of a patient-centred approach to medical education and highlights the importance of ongoing training and mentorship for mental health professionals.

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Review of the Undergraduate Psychiatry Curriculum: Integrating Themes of Culture, Diversity and Environmental Sustainability

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doi: 10.1192/bjo.2024.278

Aims. Integrated Learning Activities (ILAs) are a teaching method in Sheffield Medical School for Phase 3a students, where students will be in their third to fourth year of study and building clinical experience and skills. They're a flipped classroom technique, meaning students should arrive prepared to provide most input and clinicians are session facilitators. Each ILA has associated learning outcomes and reading material, and one or more case scenarios are used in sessions from which questions are generated for students to discuss. There are nine ILAs covering core psychiatric presentations, for example psychosis, and self-harm. Following student feedback, it became apparent that key themes around sustainability, diversity and culture were either not evident enough or used improperly. The project aimed to review the ILAs and associated documents to update and diversify the curriculum and integrate the above themes.

Methods. Feedback was initially obtained from medical students and representatives from student societies on ILAs, with one scenario receiving strong feedback on its use of cultural themes. Further meetings with students were held, and the one scenario was collaboratively rewritten and rolled out across South Yorkshire.

A feedback survey was sent out regionally to gather facilitator feedback on the format and content of existing ILAs, and thoughts on adding content on sustainability and trans-cultural issues. Expressions of interest were called for from facilitators across the region, medical students and student societies, and patient experts to create a working group to review all ILAs and associated documents, with a view to diversify the curriculum and incorporate themes on culture, diversity and sustainability.

Two working groups successfully took place with diverse representation from each invited group. All ILAs and scenarios were reviewed, and these themes were able to be added using different techniques such as ensuring scenarios include cases from diverse backgrounds, removing descriptions of race and gender when not relevant, adding learning objectives on transcultural mental health issues and the impact of mental health on culture

and vice versa, and adding scenarios and learning objectives on sustainability and sustainable practice.

Further surveys were generated for planned dissemination to students and facilitators for feedback which are planned for initial distribution in January 2024 onwards and results are awaited.

Results. ILAs and associated documents were successfully reviewed allowing the curriculum to be diversified and updated. Due to the time constraints for project completion, it wasn't possible to have specialist input on gender and gender identity and so these themes were not able to be incorporated into the curriculum. Plans have been made for a further review to be conducted in approximately 12 months and these themes to be added at that time.

Conclusion. This review has allowed for positive changes in the undergraduate curriculum and important issues around diversity, culture and sustainability and their impact on mental health and care are now specifically addressed. This aims to be the first of such collaborative curriculum reviews to ensure that the Psychiatry curriculum is up-to-date and fit to address emerging needs in mental health.

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‘An Emotional Earthquake’ – the Psychological Impact of the Earthquake in Syria on Mental Health Workers and the Value of Reflective Spaces: Who Cares for Carers?

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doi: 10.1192/bjo.2024.279

Aims. The war-ridden northern part of Syria was struck by a powerful earthquake in February 2023 leaving thousands of people dead or injured. The consequences of the earthquake on people's mental health are harder to evaluate but are likely to be severe and long-lasting, especially as people have lived through years of war and devastation.

This poster reports on facilitating reflective practice groups, online, where Syrian mental health professionals in northern Syria explored the psychological impact of the earthquake on them as individual and as professionals.

Methods. The author facilitated a series of online reflective practice group meetings. Three distinct groups of mental health workers were formed, each group consisting of 6–12 participants. Each group met twice, each session lasting an hour and a half, resulting in 6 meetings that took place between the 25th of February and the 18th of March 2023. In the first session the group discussed the psychological impact of the earthquake on them as individuals, and in the second the psychological impact on them as professionals.

Results. Thematic analysis was conducted on the discussions in the 6 reflective group meetings, resulting in three main themes: emotional responses, cognitive responses and helpful strategies. These themes are grouped detailed in terms of the impact of the earthquake on the personal and the professional lives of the participants.

Conclusion. Notwithstanding the limitations of this experience, it highlights the importance and value of group reflective spaces, as a way of helping mental health professionals process their emotional experiences in the aftermath of natural disasters.

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Embracing Diversity in Mental Health Education: A Primary Study on Cultivating Cultural Humility in Undergraduate Medicine

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doi: 10.1192/bjo.2024.280

Aims. Training within medical schools often neglects that mental health patients are very culturally diverse, contributing to a lack of cultural competence in future doctors. This deficiency exacerbates access to healthcare barriers for this population. To address these issues early in the course, we initiated a student-led teaching programme on Cultural Humility (CH) for first-year medical students, aiming to enhance cultural awareness (CA) about mental health patients.

CH emphasises the lifelong development of skills, knowledge, and attitudes, fostering a perspective of 'becoming the student of the patient' to address power imbalances between doctors and patients with mental illness, particularly from minority groups. It promotes culture as expansile incorporating many characteristics from race and religion to sexual orientation, disability and age.

This study assessed the knowledge and perceptions of first-year medical students following the introduction of CH.

Methods. After exposure to an author-developed CH learning resource, students participated in a baseline survey to gauge their understanding of CH. Subsequently, an interactive student-led workshop with a reflective exercise encouraged medical students to embrace their cultural diversity and that of others, emphasising the multifactorial nature of mental illness. The workshop incorporated prompts inspired by peer experiences of mental illness. Students then engaged in an early clinical contact programme, interacting with patients with mental illness to implement their understanding of CH into practice. Reflective blogs, written by students as part of the programme, were analysed for data inclusion using an author-selected framework.

Results. Out of 312 participants, 188 provided responses, revealing higher scores for perceived CH importance (4.83/5) compared with understanding (3.86/5) and perceived preparedness for CH implementation (3.98/5). Analysis of free-text survey responses identified learning gaps, particularly in demonstrating cultural sensitivity during patient interviews, and highlighted preferred pedagogies. Thematic analysis of ten collected blogs followed a 5R framework: Respect, Reflection, Regard, Relevance, and Resiliency. Findings indicated a demand for better training in identifying patient-specific sensitive topics and a preference for appreciating patient characteristics such as socioeconomic class without explicit labelling of these qualities as culturally engendered or directly linked to their diagnosis.

Conclusion. CH aims to foster a patient-centred approach, encouraging medical students to look beyond the diagnosis of mental illness. This study explored the multimodal integration of CH as a CA toolkit into the undergraduate curriculum, providing insights into the application of preclinical CA teaching and students' perceptions of its clinical applicability in their learning about different patient populations experiencing mental illness.

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