

like the systemic constructs that has a strong impact on the health of organizations. In addition to the specific contribution to management tools, it is expected that this interview may help to develop new studies and practices about organizational health in work and in family businesses.

Disclosure of Interest: None Declared

EPV0575

Mental health problems in tunisian military population

D. Njah*, H. Kefi, I. Bouzouita, A. Baatout, C. Bencheickh, S. Eddif and A. Oumaya

Psychiatry, military hospital, tunis, Tunisia

*Corresponding author.

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Introduction: Military personnel can face unique risks and challenges to their mental health. High-stress situations, prolonged absences, and difficulty adjusting to civilian life can affect their mental health and hence develop psychiatric disorders, particularly major depressive disorder (MDD) and post-traumatic stress disorder (PTSD). That's why searching for involved factors that could have an impact on these mental disorders or help predict them is crucial in the military population.

Objectives: Our objectives were to describe the epidemiological profile of military patients followed in the psychiatric department of the military hospital of Tunis (MHT) and to identify the risk factors associated to psychiatric disorders in this population.

Methods: This was a retrospective study conducted over a period of 4 weeks, in the psychiatry department of the MHT. We included in our study patients drawn at random at the outpatient clinics, all psychiatric disorders included. We analyzed the epidemiological characteristics of the patients as well as the risk factors with the SPSS software 26.0.

Results: One hundred military patients were included in our study. The mean age of the patients was 38.74(±9.73) years, 93% of them were male, 86% had a high school education, 71% belonged to middle socioeconomic category, and 59% lived in the military barracks. The mean duration of service was 17.68(±9.22) years. Active military members were assigned to weapons jobs (45%), administrative (15%), technical (24%), transportation (8%), and health (6%) specialities. We found that MDD was the main psychiatric disorder found in 64% of the patients with a mean severity of 76.9%. Besides, administrative specialities were the most frequent source of MDD (73.3%), while transportation posts were the most common cause of the PTSD (12.5%). And finally weapons specialities were the most likely to cause adjustment disorders (13.3%). In addition, we found that a long military service duration was associated with a chronic evolution of all the mental disorders (p:0.002).

Conclusions: The army is mostly affected by major depressive disorder. The position occupied by the patient seems to play a role in the type of the disorder. The seniority in the military service would be a risk factor for chronicity of the mental disorder.

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EPV0576

Efficacy of an electronic cognitive behavioural therapy program developed and delivered via the Online Psychotherapy Tool for mental health problems related to the COVID-19 Pandemic

E. Moghimi^{1*}, M. Omrani², A. Shirazi³, J. Jagayat⁴, C. Stephenson¹ and N. Alavi¹

¹Psychiatry, Queen's University, Kingston, Canada; ²Psychiatry, OPTT inc, New York, United States; ³OPTT inc, Toronto and ⁴neuroscience, Queen's university, Kingston, Canada

*Corresponding author.

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Introduction: Lockdowns and social distancing resulting from the COVID-19 pandemic have worsened population mental health and made it more difficult for individuals to receive care. Electronic cognitive behavioural therapy (e-CBT) is a cost-effective and evidence-based treatment that can be accessed remotely. The objective of the study was to investigate the efficacy of online psychotherapy during the pandemic.

Objectives: The purpose of the present study was to develop and administer an e-psychotherapy program for patients with depression and anxiety d), affected by the COVID-19 pandemic. The program aimed to significantly reduce stress and psychological distress in patients, from pre- to post-intervention.

Methods: Participants (n = 59) diagnosed with MDD and/or GAD, whose mental health symptoms initiated or worsened during the COVID-19 pandemic. The online psychotherapy program focused on teaching coping, mindfulness, and problem-solving skills. Symptoms of anxiety and depression, resilience, and quality of life were assessed.

Results: From the participants assessed for eligibility, n = 14 did not meet the inclusion and exclusion criteria and n = 7 declined to participate. As a result, n = 59 participants commenced the study. In total, 21 participants dropped out of the study (n = 11 from Weeks 1-3, n = 7 from Weeks 4-6, and n = 3 at Week 7), and 38 participants completed the study. The large majority of the total sample identified as women (n = 41, 69%). Two participants identified as Other and both dropped out of the treatment at Weeks 4 and 6, respectively. The average age of the sample was 32.26 (SD = 12.67). No significant differences were observed at baseline for any demographic variables or scores of treatment completers and dropouts. A significant difference was observed between the number of sessions completed by those who dropped out and those who finished the program (p < 0.001). On average, treatment dropouts completed approximately 41% of the treatment before dropping out.

Participants demonstrated significant improvements in symptoms of anxiety (p = 0.023) and depression (p = 0.029) after the intervention. Similar trends were observed in intent-to-treat analysis. No significant differences were observed in resilience and quality of life measures.

Conclusions: The evidence strongly suggests that online psychotherapy can supplement the current care model. Although no changes in quality of life or resilience were reported, these findings may be due to the persistent environmental challenges that are outside the normative levels observed pre-pandemic. While the