

Mindfulness-based parenting training might be useful in case of attachment-related problems to improve the parent-child relationship.

**Disclosure:** No significant relationships.

**Keywords:** mindful parenting; maternal attachment; child perception; mindfulness

## EPP0720

### Are the Kessler Psychological Scales suitable for screening for mental disorders in low-threshold mental health services in German-speaking countries?

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**Introduction:** The Kessler Psychological Distress Scales (K10 and K6) are used as screening tools to assess psychological distress and are the first-line assessment of need for help in the Headspace services.

**Objectives:** Thus, we studied the psychometric properties of their German versions in a Swiss community sample to evaluate their potential usefulness to screen for mental disorders or relevant mental problems in low threshold transdiagnostic German-speaking services.

**Methods:** The sample consisted of 829 citizens of the Swiss canton Bern of age 19-43 years. K10/K6 were validated against Mini-International Neuropsychiatric Interview (M.I.N.I.) diagnoses, questionnaires about health status and quality of life. Receiver Operating Characteristic (ROC) curve analyses were used to test for general discriminative ability and to select optimal cut-offs of the K10 and K6 for non-psychotic full-blown and subthreshold mental disorders.

**Results:** Cronbach's alphas were 0.81 (K10) and 0.70 (K6). ROC analyses indicated much lower optimal thresholds than earlier suggested; 10 for K10 and 6 for K6. At these thresholds, against M.I.N.I. diagnoses, Cohen's Kappa ( $\leq 0.173$ ) and correspondence rates ( $\leq 58.14\%$ ) were insufficient throughout. Values were higher at the earlier suggested threshold, yet, at the cost of sensitivity that was below 0.5 in all but three, and below 0.3 in all but six cases.

**Conclusions:** For the lack of sufficient validity and sensitivity, respectively, our findings suggest that both K10 and K6 would only be of limited use in a low-threshold transdiagnostic mental health service – comparable to Headspace – for young adults in Switzerland and likely other German-speaking countries.

**Disclosure:** No significant relationships.

**Keywords:** screening; general population; concurrent validity; Mental Disorders

## EPP0721

### Attenuated positive and negative symptoms in patients at clinical high-risk for psychosis

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**Introduction:** The clinical high-risk for psychosis (CHR) is mainly established by the presence of attenuated positive symptoms (APS), but there is evidence of the role of attenuated negative symptoms (ANS) in the development of psychotic spectrum disorders. It is important to establish a link between APS and ANS in patients at CHR in order to improve early detection of psychosis.

**Objectives:** Establish the relationship between APS and ANS in depressive patients at CHR.

**Methods:** 130 depressive young in-patients at CHR with APS (average age 19.5) and 71 ones with ANS (average age 19.5) were examined. The HDRS scale was used to assess depressive symptoms, the SOPS scale was used to assess APS and ANS, and the SANS scale was used to assess ANS. The results are presented in median values.

**Results:** No differences were found between two groups in the severity of depressive symptoms on the HDRS scale and CHR symptoms on the SOPS scale (22 vs 23.5 and 45 vs 43 respectively). Statistically valid differences have been established between the groups in the APS severity on the sub-scale of positive symptoms SOPS: 11 and 7 ( $p < 0.001$ ). No differences in the ANS severity on the sub-scale of negative symptoms were detected (17 and 18.5,  $p = 0.207$ ). There were also no differences in the ANS severity on the SANS scale (40 and 47,  $p = 0.163$ ).

**Conclusions:** It has been established that patients at CHR with APS also have ANS, which may have clinical significance for early detection of psychosis.

**Disclosure:** No significant relationships.

**Keywords:** Attenuated negative symptoms; Clinical high-risk; Attenuated positive symptoms; Early detection

## EPP0722

### Burnout among early career psychiatrists in Russia – results of a cross-sectional study

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**Introduction:** Despite the long history of burnout studies, the problem of burnout among psychiatric specialists in Russia is insufficiently studied. The risk of burnout is the highest among psychiatrists in the first 10 years of their career.

**Objectives:** To assess the prevalence and severity of burnout in early career psychiatrists (ECPs) in Russia.

**Methods:** An anonymous online survey of ECPs in Russia was conducted in July-August 2019 with a screening for burnout using the Maslach Burnout Inventory (MBI). The final sample consisted of 165 people (61.2% women; mean age  $31.05 \pm 3.88$ ). 95.2% of respondents lived in urban areas.

**Results:** A high level of burnout according to at least one of the MBI scales was revealed in 71.5% of ECPs: in 79 (78.2%) women and 39 (60.9%) men ( $\chi^2(1)=5.74$ ;  $p=0.017$ ). Mean values of the MBI Emotional Exhaustion scale corresponded to  $23.33 \pm 8.97$  and  $17.97 \pm 8.49$  ( $U=1999.5$ ;  $p=0.003$ ), the MBI Depersonalization scale –  $10.46 \pm 4.81$  and  $9.16 \pm 4.22$  ( $U=2598.5$ ;  $p=0.083$ ), and the MBI Personal Accomplishment scale –  $33.02 \pm 5.98$  and  $35.32 \pm 5.75$  ( $U=2409.5$ ;  $p=0.026$ ) for women and men, respectively. The following risk factors for professional burnout were identified: female sex (OR=3.54 [95% CI: 1.96; 6.39],  $p<0.001$ ), overlapping of several working positions (OR=2.44 [95% CI: 1.36; 4.37],  $p=0.003$ ), difficulties in work due to changes in documentation requirements introduced since the start of career (OR=2.32 [95% CI: 1.31; 4.11],  $p=0.004$ ).

**Conclusions:** A high frequency of burnout among ECPs in Russia was revealed which suggests the urgent need for studies assessing the ways to prevent burnout in psychiatrists in Russia.

**Disclosure:** No significant relationships.

**Keywords:** early career psychiatrists; burnout; ECPs

## EPP0724

### A systematic review of the relationship between emotional intelligence and diabetes management

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**Introduction:** Diabetes has been associated to affective disorders and mental health problems which complicate the management of the disease. Emotional intelligence (EI), or the ability to perceive, facilitate, understand and regulate emotions has shown to be a protective factor of emotional disorders in general population.

**Objectives:** To evaluate the role of EI and EI training in the biological and psychological variables related to people with Type 1 and 2 diabetes.

**Methods:** A systematic review was conducted in PubMed and Scopus database without time limitations, for studies examining the link between diabetes and EI. A total of 11 eligible studies were selected according to the inclusion criteria.

**Results:** We divided the results into four sections: 1) EI and HbA1c, 2) EI training effects, 3) Differences in EI between persons with diabetes and without diabetes, and 4) EI and psychological adjustment and well-being. The results showed negative correlations between EI and HbA1C, positive effects of EI training on quality of life, anxiety and glycaemic control, no differences in EI between

people with diabetes and healthy individuals and, finally, negative correlations between EI and different psychological variables such as diabetes-related anxiety and distress, and positive correlations with quality of life, well-being and marital satisfaction.

**Conclusions:** EI appear to be a promising protective factor for biological and psychological variables in individuals with diabetes. This systematic review offers a starting point for a theoretical and practical understanding of the role played by EI in the management of diabetes. Limitation and future lines of investigations will be discussed.

**Disclosure:** No significant relationships.

**Keywords:** Type 2 diabetes; Emotional Intelligence; Type 1 diabetes; Diabetes Management

## EPP0727

### Let the soul speak: Promoting mental health awareness through arts and culture

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**Introduction:** Nefashot - (meaning “Souls” in Hebrew) is a social activist initiative that aims to promote mental health (MH) awareness in the public domain through cultural, artistic, and dialogue-based events.

**Objectives:** The two main objectives of this project are: to raise awareness and promote dialogue about MH issues in the public sphere and to create an inclusive environment for people living with MH conditions where their voices can be heard.

**Methods:** For this purpose, we have created a week of events around the *international mental health day* on October 10<sup>th</sup>. Our strategy for producing the MH week is by 4 stages: 1) Call for action which is published widely on social media 2) Collection of forms filled, connections and personal accompaniment 3) Event directed accompaniment, and group meeting around common topics 4) Publication as a group to strengthening the sense of belonging and enhancing community visibility.

**Results:** Our 80 events over the last three years have been organized by creators, artists, people with and without mental illness, family members, and professionals. Participants are extended in the event production by geographical location, type of art or culture event, type of relation to MH (for example, family member) and by social groups (Arabic/English speakers, LGBT), as well as collaborations within the group.

**Conclusions:** Promoting MH through public activism is ideal because it enable each participant to shape the process as well as the product. Furthermore, we find the relationship between art and MH enriching in both directions.

**Disclosure:** No significant relationships.

**Keywords:** Belonging; Initiative; stigma; Activism