

## EW256

### Association between mental health problems of stunted children and common mental disorders of their mothers in Brazil: A case control study

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**Introduction** In deprived environments, mental health problems for both the mother and her stunted child may be related.

**Objective** To verify possible association between a child's nutritional and mental health status with common maternal mental disorders (and associated impairment).

**Aims** To contribute to management of malnutrition and mental health in low-income populations.

**Methods** Case-control study in which 48 malnourished children (aged 48 to 72 months) were compared with 50 eutrophic children. The child's nutritional status, the children's mental health, the maternal mental health, and the associated disability were evaluated by using the WHO criteria, the "Strengths and Difficulties Questionnaire" (SDQ), the "Self-Report Questionnaire"-20 (SRQ-20), and the "Sheehan Disability Scale" (SDS), respectively. In addition, selected socio-economic aspects were considered.

**Results** Variables with significant odds ratio (OR) in the univariate analysis were: maternal education (OR: 2.96, 95% CI: 1.30–6.75), number of residents in the household (OR: 0.32, 95% CI: 0.14–0.74), number of children in the household (OR: 0.25, 95% CI: 0.10–0.61), and social class (OR: 2.30, 95% CI: 1.02–5.18). The only SDQ dimension that tended to be associated with malnutrition was conduct problems ( $P=0.08$ ). The disability associated with probable common maternal mental disorders (CMD) also showed statistically significant association ( $P=0.02$ ). In the logistic regression, child malnutrition remained associated with child conduct problems and disability associated with probable CMD.

**Conclusions** Conduct problems in stunted children are positively associated with CMD and related disability. Longitudinal studies are necessary to confirm these hypotheses.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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## EW257

### Should I stay or should I go? Mobility and migration among psychiatric trainees in Europe – EFPT Brain Drain Survey

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**Introduction** Workforce migration of mental health professionals seems to have a significant impact on mental health services, both in the donor and host countries. Nevertheless, information on migration in junior doctors within Europe is very limited. Therefore, the European Federation of Psychiatric Trainees (EFPT) has conducted the Brain Drain Survey.

**Objectives** To identify, in junior doctors training in psychiatry, the impact of international short-term mobility experiences, towards a future workforce migration across countries, exploring its patterns and reasons.

**Methods** In this cross-sectional international study, data were collected from 2281 psychiatric trainees in 33 countries. All participants answered to the EFPT Brain Drain Survey reporting their attitudes and experiences on mobility and migration.

**Results** Only one-third of the trainees had a short-mobility experience in their lifetime, being education the main purpose for these experiences. Interestingly, the main predictors for future migratory tendency were not only the having a income and being dissatisfied with this income, but having a short-mobility experience. In fact, people that had short-mobility experiences were two times more likely to express a migratory tendency. Trainees that went abroad were predominantly satisfied with their experiences, reporting that these influenced their attitudes towards migration, positively.

**Conclusions** These findings show that short-term mobility has a positive impact into future long-term migration, increasing its probability.

**Keywords** Doctors; Training; Mobility; Migration

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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## EW258

### Depression course, functional disability, and NEET status in young adults with mental health problems

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**Introduction** Role functioning is key to optimal health and inoculates against life-long inequality. Depression is a leading cause of functional disability. In most cases, improved symptomatology corresponds with improved functioning; however, functioning does not always return to "normal", despite symptom remission. Furthermore, the relationship between symptom remission and the likelihood of being Not in Employment, Education or Training (NEET) is unknown.

**Objectives and aim** To examine the temporal associations between depression course, functioning, and NEET status in young adults with mental health problems.